

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
 AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

Amended

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

96 DEC 30 PM 12: 55

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # *K54319*

1. Corporation Name
 Chriscorp, Inc.

Principal Place of Business Mailing Address
 12201 N.W. 35th Street 12201 N.W. 35th Street
 Bay #102 Bay #102
 Coral Springs, FL 33065 Coral Springs, FL 33065

3. Date Incorporated or Qualified 12/13/88
 3a. Date of Last Report 04/29/96
 4. FEI Number 65-0093196 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt #, etc. 26 Suite, Apt #, etc.
 22 City & State 27 City & State
 23 Zip 28 Zip Country 29 Country
 24 25 29 30

9. Name and Address of Current Registered Agent
 Joseph L. Rizzo
 12086 N.W. 25th Street
 Coral Springs, Florida 33065

10. Name and Address of New Registered Agent
 81 Name Christiane Rizzo
 82 Street Address (P.O. Box Number is Not Acceptable) 9871 N.W. 48th Court
 83
 84 City Coral Springs FL 85 Zip Code 33076

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Christiane R. Rizzo* Christiane R. Rizzo 12-19-96
Signature of registered agent or officer or director (if applicable) (NOTE: Registered Agent signature required when re-registering) DATE

12. OFFICERS AND DIRECTORS
 TITLE President/Director DELETE
 NAME Joseph L. Rizzo
 STREET ADDRESS 12086 N.W. 25th Street
 CITY-ST-ZIP Coral Springs, Florida 33065
 TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TITLE DELETE
 NAME
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 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE President/Director Change Addition
 1.2 NAME Christiane Rizzo
 1.3 STREET ADDRESS 9871 N.W. 48th Court
 1.4 CITY-ST-ZIP Coral Springs, Florida 33076
 2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP
 3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP
 4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP
 5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP
 6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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 *****1.25 *****1.25

Christiane R. Rizzo
 12/30/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Christiane R. Rizzo* Christiane R. Rizzo 12-19-96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Printing Phone #

CR2E034 (3/96)