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.) APPROVED AND FILED **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 AUG 12 PM 3: 00 1996 DIVISION OF CORPORATIONS DOCUMENT # 1. Corporation Name K64939 SECRETARY OF STATE TALLAHASSEE, FLORIDA (7) TALAN OF BOYNTON, INC. Principal Place of Business Mailing Address 9804 K-1 S. MILITARY TRL 9804 K-1 S. MILITARY TRL. **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** 3. Date Incorporated or Qualified 3a. Date of Last Report 02/10/1989 09/21/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 2642 65-0121916 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required **\$5.00** May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199 032 30 Yes No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CLARK, THURMAN T. 2642 S.E. 28TH CIRCLE #78 BOYNTON BCH. FL 33435 83 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstitting) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 TITLE Change Addition CICULA (41 S11 S1211) -08/12/96--01044--025 ****383.75 ****383,75 NAME CLARK, THURMAN T. 12 NAME 2642 SE 28TH CIR., #76B STREET ADDRESS 1.3 STREET ADDRESS **BOYNTON BCH. FL** DITY - ST - ZIF 14 City - ST-ZIP TITLE DELETE 2 1 1tflE Change Addition NAME 2 2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP TITLE DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Add tion NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY - ST - ZIP DELETE TITLE 51 TITLE | Change | Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP TITLE DELETE 6 1 THTLE Change NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST - ZIP 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 1 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 early, 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 a statishingoly-mith an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR