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.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT # 1. Corporation Name

K70986

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FI	ORIDA	ATI	ANTIC	CORPORAT	ION
			σ	MATERIAL COLORS	кли

FLORIC	DA ATLANTIC CORPORATION	ON						
Principal Place of Business Mailing Address								
3210 ST CHARLES PL 3210 ST CHARLES PL BOCA RATON FL 33434 US								
						3. Date incorporated or Qualified 03/07/1989 3a. Date of Last Report 04/04/1995		
21	Place of Business	2a, Mailing Address 26				4. FEI Number Applied For 65-0103423 Not Applied		
Suite, Apt	#, etc.	Suite Apt #, etc.				5. Certificate of Status Desired 5.		
22 City & Stat	la	City & State		·		Fee Required		
23	ic.	28				6. Election Campaign Financing \$5.00 May Be		
Zip	Country	Zip	Cour	ntrv		Trust Fund Contribution Added to Fees		
24	25	29	30	,		8. This corporation has liability for intangible tax under sides 199 032. Florida Statutes Yes No		
	9. Name and Address of Curre		_122.1			10. Name and Address of New Registered Agent		
BiC	GGS, ARTHUR E			81	Name			
3210 ST CHARLES PLACE BOCA RATON FL 33434			İ	82	Street Ad	ldress (P.O. Box Number is Nut Acceptable)		
, DC	ON INTUITIE 33434		}	83				
			}	84	City	85 Zip Code		
dd Dwo oot	to the east is east 15°	00				▶1 † `		
office or i	to the provisions of Sections 607.05 registered agent, or both, in the Stat	02 and 607.1508. Florida Stati e of Florida. Such change was	ites, the abo authorized	by t	-named cor the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. Thereby accept the appointment as registered		
agent La	am familiar with, and accept the obliq	gations of, Section 607.0505, F	lorida Statu	tes		The appointment an registered		
SIGNATURE	Signature type of a period reposition of the policieral a		TOTAL					
12.		ND DIRECTORS	13.	AJer	et signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	DELETE	11 [1]	.E		Change Addit		
NAME	BIGGS, ARTHUR E		1.2 NAI	ΜŁ				
STREET ADDRESS	3210 ST CHARLES PLACE		1351	EET.	ADDRESS			
CITY-ST-ZIP	BOCA RATON, F		1401	Y - S1	T-71P			
TITLE	DSV	DELETE	2 1 TITI			Change Addit		
NAME	BIGGS, CHARLOTTE		2.2 NA	ΜE				
STREET ADDRESS	3210 S CHARLES PLACE		2351	EFT (ADDRESS	·		
CHTY - ST - ZIP	BOCA RATON FL		2 4 011					
TITLE	DV	DELFTE	31111			Change Addit		
NAME	BIGGS, ARTHUR E. III		3.2 NAJ	d:				
STREET ADDRESS	1099 SW 4TH ST		3 3 STA	EET /	ADORESS			
CITY - ST - ZIP	BOCA RATON FL		3.4 CIT	Y - S	1 - 7IP			
TITLE	DV	DELETE	4 1 1 1	.E		Change Addit		
NAME	BIGGS, WILLIAM E.		4 2 NA	ME				
STREET ADDRESS	17052 BOCA CLUB BLVD, A	PT A	4.3 STH	EFTA	ADDRESS			
CITY - ST - ZIP	BOCA RATON FL		4.4 CIT	Y-\$1	1 219			
TITLE		DELETE	5 1 111	.f		Change Addits		
NAME			5 2 NAM	λĹ				
STREET ADDRESS			53 STR	EETA	ADDRESS			
CITY-ST-ZIP			5 4 CIT	r - SI	i - ZIP			
TITLE		DELETE	6 1 TrTL	.F		Change Add-ti		
NAME			6 2 NAM	AE.				
STREET ADDRESS			63STR	EET #	ADDRESS			
CITY - ST - ZIP	L		64 C·T	(- S1	- 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, 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 Byok 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: __

JULIU & LES PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/7/96 407-994 5862