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** 

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

L10217

FIRST FLORIDA CAPITAL GROUP, INC.

(2)

**FILED** Jun 17, 1996 08:00 AN **Secretary of State** 



| Principal Plac   | e of Business   | Mailing Address   |  | ı sanıldır dalı tibit darim itadi tibit i               | am: miðir diðir diðir diðir diðir diðir biðir |
|--|---|---|--|---|---|
| 7000 NW 47TH PL. 7000 NW 47TH PL. LAUDERHILL FL 33319 LAUDERHILL FL 33319 US |   |   | į  |   |   |
|  |   | 00  |  | 3. Date incorporated or Qualified 08/17/1989            | 1 3a, Date of Last Report 01/27/1995          |
| 2. Principal P   | lace of Business  | 2a. Mailing Address                                       | Δ.   | 4, FEI Number   | Applied For                                   |
| 21 7000  | NW 47th HACE  | 26 7000 Nu  | 47 th flace  | 65-0138707  | Not Applicable                                |
| Suite, Apt   | #, etc  | Suite, Apt. #, etc  | _  | 5. Certificate of Status Desired                        | \$8.75 Additional Fee Required                |
| City & State 23 LAUGENHII, FL  |   | City & State 28 Land Each, 11                             |  | Election Campaign Financing     Trust Fund Contribution | \$5.00 May Be<br>Added to Fees                |
| Ζφ   | Country   | Zip   |  | 8. This corporation has hability fo                     | · · · · · · · · · · · · · · · · · · ·         |
| 24 <b>933</b>  | 9 25 BROWALL  | 29 33319  | 30 BROWN   | Florida Statutes  | Yes No  |
|  | 9. Name and Address of Current  | Registered Agent  |  | 10. Name and Address of New R                           | legistered Agent                              |
| HE   | ss, edward L  |   | 81 Name  |   |   |
| 1014 N 32 AVE  |   |   | 82 Street Add  | 82 Street Address (P.O. Box Number is Not Acceptable)   |   |
| но   | LLYWOOD FL 33021  |   | 83   |   |   |
|  |   |   | [ ]  |   |   |
|  |   |   | 84 City  |   | FL 85 7 p Code                                |
| 11. Pursuant   | to the provisions of Sections 607.0502  | and 607.1508, Florida Stat                                | utes, the above-named corp   | oration submits this statement for the                  | nurnose of changing its registered            |
| office or re<br>agent. Las   | egister d'agent, or both, in the State o<br>m'taglier with, and accept the obligati | f Florida. Such change was<br>ons of, Section 607,0505, I | s authorized by the corporations.<br>Florida Statutes  | on's board of directors. Thereby accep                  | pt the appointment as registered              |
| SIGNATURE  | Sdundeless  | J   |  |   |   |
| 12.  | Signature typed or protect function regulating agent<br>OFFICERS AND                |   | z)Té. Franstei⊷d Agunt signat de te pur  |   | CAIE  |
| Title  | DP OFFICERS AND   | DELETE  | 13.  | ADDITIONS/CHANGES TO OFF                                | ICERS AND DIRECTORS IN 12  Change Addition    |
| NAME   | HESS, EDWARD L  |   | 1.2 NAME   |   | C Change C Manual (2)                         |
| STREET ADDRESS   | 7000 N.W. 47TH PLACE  |   | 1 3 STREET ADDRESS   |   | Ę   |
| CITY+ST-7iP  | LAUDERHILL FL 33319   |   | 14 CHY - ST - ZIP  |   | 2   |
| TITLE  | DEV   | DELETE  | 2 1 TITLE  |   | Change Addition                               |
| NAME   | HESS, CHERI L   |   | 2.2 NAME   |   |   |
| STREET ADDRESS   | 7000 N.W. 47TH PLACE  |   | 2.3 STREET ADDRESS   |   | İ   |
| CiTY - ST - ZIP  | LAUDERHILL FL 33319   |   | 2 4 CITY - ST - ZIP  |   |   |
| TITLE  |   | DELETE  | 3 1 TITLE  |   | Change Addition                               |
| NAME   |   |   | 3 2 NAME   |   |   |
| STREET ADDRESS   |   |   | 3 3 STREET ADDRESS   |   | j   |
| CITY-ST-ZIP<br>TITLE   |   | DELETE  | 3.4 CHY-SI-ZIP   |   | Character L Add as                            |
| NAME   |   | L., 1720212   | 4 2 NAME   |   | Change Addition                               |
| STREET ADDRESS   |   |   | 4 3 STREET ADDRESS   |   |   |
| CITY - ST - ZIP  |   |   | 4.4 City-St-ZiP  |   |   |
| TITLE  |   | DELETE  | 51 DILE  |   | Change Addition                               |
| NAME   |   | _   | 5.2 NAME   |   |   |
| STREET ADDRESS   |   |   | 5.3 STREET ADDRESS   |   |   |
| CITY-ST-ZIP  |   |   | 5 4 CITY - ST - ZIP  |   |   |
| TITLE  |   | DELFTE  | 6 1 TITLE  | VALUE 481   | Change Addition                               |
| NAME   |   |   | 6.2 NAME   |   |   |
| STREET ADDRESS   |   |   | 6.3 STREET ADDRESS   |   |   |
| CHTY - ST - ZIP  |   |   | 5.4.0-TY-S1_ZIP  |   |   |
| 1.1 Lda barah  | w cortifu Brat the information evical edi-  | rate this education are a section and a william           | the control of the co | the location and an extended Continue                   | 110 07 07 07 0                                |

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 armual 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 arm 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 Blood 2 or Block 13 if charged, or on an attachment with an address.

SIGNATURE:

6/11/96 954-749-8360