FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1997 97 JUN -2 AM 9: 20 DOCUMENT # 129973 (9)SECRETARY OF STATE TALLAHASSEE, FLORIDA SFIC CO. Principal Place of Business Mailing Address % MITCHELL RUBENSTEIN 2255 GLADES RD., SUITE 237W BOCA RATON FL 33431-7395 % MITCHELL RUBENSTEIN 2255 GLADES RD., SUITE 237W BOCA RATON FL 33431 3. Date Incorporated or Qualified 3a. Date of Last Report 11/14/1989 05/01/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0156680 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζip Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RUBENSTEIN, MITCHELL 2255 GLADES RD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 237W 83 **BOCA RATON FL 33431** 84 City Zip Code 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 reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 800002204588 DELETE TITLE 1.1 TILLE RUBENSTEIN, MITCHELL NAME 1.2 NAME -06/06/97--01085--009 2255 GLADES RD., #237W STREET ADDRESS 1.3 STREET ADDRESS ****165.00 ****165.00 **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE. Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition TITLE 41 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 City-S1-ZIP DELETE Change Addition TITLE 5.1 TITLE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 tam an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

5.2 NAME 5.3 STREET ADDRESS

617016

6.2 NAME

DELETE

5.4 CITY - \$1 - ZIP

6.3 STREET ADDRESS

MITCHELL DURG OF THE LAW THE DEC OF

(96/6)

Addition

Change