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

	MENT # L9396 . & associates, inc.	1 (5)		Liernen en harbenden bind bind	
Principal Place	of Business	Mailing Address			HOL DIBIO DIDIO DIDIA DIDIA DIDIA DIDIA DIDIA
•	IO GARDENS BLVD	333 W. CAMINO GARDE P.O. BOX 102A BOCA RATON FL 33432		3. Date Incorporated or Qualified 08/06/1990	3a, Date of Last Report 06/14/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0211476	Not Applicable
Suite, Apt. #	#, etc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22]	<u></u>	Cd. 5 Ctoto			
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation has liability for	
24	25	29	30	Florida Statutes [Yes No
	9. Name and Address of Curre			10. Name and Address of New R	legistered Agent
FRA	ANK RACCIOPP INS		81 Name		
333 W CAMINO GARDEHS BLVD 1 333 CAMINO GARDENS BLVD W		102	82 Street Ad	Address (P.O. Box Number is Not Acceptable)	
	CA RATON 33432		83		
			84 City		FL 85 Zip Code
44 6	46	E02 and 607 1600 Florida Cras	the the above samed on	poration submits this statement for the	purpose of changing its registered
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office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was	authorized by the corpora	tion's board of directors. Thereby acce	pt the appointment as registered
office or re agent. Fan SIGNATURE	m familiar with, and accept the obt	te of Florida. Such change was igations of, Section 607.0505, F	authorized by the corpora	ition's board of directors. Thereby above	pt the appointment as registered
office or re agent. I an SIGNATURE	m familiar with, and accept the obtaining a special street of the	te of Florida. Such change was igations of, Section 607.0505, F	authorized by the corpora lorida Statutes.	ition's board of directors. Thereby above	pt the appointment as registered
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SIGNATURE:

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 13 if changed, or on an attachment with an address

GNATURE:

The Department of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address

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SIGNITURE AND YEAR OF PRINTED MARKE OF SIGNING OFFICER OR DIRECTOR

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