

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L96149

(4)

1. Corporation Name

JAMES F. PERRY & COMPANY



Principal Place of Business

7300 NORTH KENDALL DRIVE, #519
MIAMI FL 33156

Mailing Address

7300 NORTH KENDALL DRIVE, #519
MIAMI FL 33156

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

08/23/1990

3a. Date of Last Report

04/27/1995

4. FEI Number

65-0214370

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

TERREMARK CORPORATE AGENTS, INC.
2601 S. BAYSHORE DR.
PENTHOUSE ONE
MIAMI FL 33133

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 of the person who is the registered agent or the person who is the registered office)

(Signature of the person who is the registered agent or the person who is the registered office)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PST
PERRY, JAMES F.
7300 N. KENDALL DR. 519
MIAMI FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
PERRY, JAMES F.
7300 N. KENDALL DR. 519
MIAMI FL

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

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CITY-ST-ZIP

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CITY-ST-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

Change Addition

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

Change Addition

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

Change Addition

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

Change Addition

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

Change Addition

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

SIGNATURE:

James F. Perry

James F. Perry, President 2/27/96 (305) 670-8008

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)