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

PROFIT CORPORATION ANNUAL REPORT

1997

appears in Block 12 or Block

SIGNATURE:



ELORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L97190

5x-HOUSTON & SHAHADY, P.A. Principal Place of Business Mailing Address 100 NE THIRD AVE. 100 NE THIRD AVE. SUITE 850 SUITE 850 FT. LAUDERDALE FL 33301-1148 FT. LAUDERDALE FL 33301-1155 3. Date Incorporated or Qualified 3a. Date of Last Report 03/07/1996 08/22/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0222832 26 Not Applicable Suite, Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution П Added to Fees 28 Zip Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 25 29 30 Florida Statutes 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 HOUSTON, BART ALAN, ESQ. 100 N.E. THIRD AVE. Street Address (P.O. Box Number is Not Acceptable) **SUITE 850** 83 FT. LAUDERDLAE FL 33301-1146 84 Zip Code 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, typud or ponted name of registered agent and title it approable. (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition THLE 11 TITLE SHAHADY, THOMAS R. NAME 1.2 NAME 100 N.E. THIRD AVE. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 CITY - ST - ZIP CITY-ST-2P DELETE Change Addition TIFLE 2.1 TITLE HOUSTON, BART A. 2.2 NAME 100 N.E. THIRD AVE. STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-S1-7IP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition THEF 4.1 TITLE 4. 2 NAME NAME 43 STREET ADDRESS STREET ADORESS 4.4 CiTY-ST-ZIP CITY - \$1 - 201 DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - 2IP CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZiP 14. I do hereby certify that the information supplied with this filling 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 I am an officer or director of the perpendicular or the focus or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

ttachment with an address.