SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED Aug 20 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 **DOCUMENT #** (8)F & G DEVELOPERS, CORP. Principal Place of Business Mailing Address 16080 SW 89 AVENUE 16080 SW 89 AVENUE MIAMI FL 33157 MIAMI FL 33157 US DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 05/01/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 67255W/4457 67255W 1445T 21 Not Applicable 59-2754278 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FC. MIKK IAM 23 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 33158 DADE DADE 24 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GORRA, EGBERT A. Name 16080 SW 89 AVENUE ROAD 82 Street Address (P.O. Box Number Is Not Acceptable) **MIAMI FL 33157** City 84 Zip Code 33/58 MIAMI 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 reinstaling) CR2E034 (5/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PSD TITLE 1.1 TITLE _ DELETE GORRA, EGBERT A. NAME 12 NAME 6725 SW 1445T 16080 SW 89TH AVE RD STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL MIAUI FL 33158 CITY-ST-ZIP A CITY-ST-ZIP VID TITLE 2.1 TITLE Change DELETE GORRA, EGBERT JR. NAME 2.2 NAME 16080 SW 89TH AVE. RD. 6725 SW 14455 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 11/AMI FC 33158 CITY-ST-ZIF 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change | Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY-ST-ZIP TITLE DELETE 5 1 TITLE Change Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY-ST-ZIP TITLE DELETE 6,1 TITLE Change Addition

14. I 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 I am 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. AUG 11, 1998 (305)25/-100/ SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP