SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (1)**DOCUMENT #** M41365 SOLDANOMAR, INC. Mailing Address Principal Place of Business 795 E. 25TH STREET 795 E. 25TH STREET HIALEAH FL 33013-3816 HIALEAH FL 33013-3816 3a. Date of Last Report 3. Date incorporated or Qualified 04/07/1995 11/03/1986 Applied For 4. FEI Number Mailing Address Principal Place of Business Not Applicable 59-2730465 26 21 \$8.75 Additional Suite. Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s 199 032, Country Country Zip] Yes [] No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PANGANIBAN, DANILO Street Address (P.O. Box Number is Not Acceptable) 82 795 EAST 25TH ST. HIALEAH FL 33010-9150 83 Zip Code 85 84 City 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 nereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Bigustered Agent signature required when releasting) Stonature, type dior printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)OFFICERS AND DIRECTORS 13. 12. DELETE 1 1 TITLE TITLE CR2E034 1.2 NAME PANGANIBAN, DANILO NAME 1.3 STREET ADDRESS 3090 ENSENADA WAY STREET ADDRESS 1.4 CiTY - ST - ZiP MIRAMAR FL CITY-ST-ZIP Change Addition DELETE 2 1 TITLE TITLE 2.2 NAME PANGANIBAN, ANGELITA NAME 2.3 STREET ADDRESS 3090 ENSENADA WAY STREET ADDRESS 2 4 CITY - ST - ZIP MIRAMAR FL CITY-ST-ZIP Change Addition DELETE 3 1 THLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY - ST - ZIP Addition Change DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 6 1 TIFLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6 4 City - ST - 71P I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address DITY - ST - ZIP 07-08-96 835-7537

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN