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** ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # M47526 (2)N.E.P. INTERNATIONAL, INC. Principal Place of Business Mailing Address 4501 NW 103RD AVE. 4501 NW 103RD AVE. SUNRISE FL 33351 SUNRISE FL 33351 3a. Date of Last Report 3. Date Incorporated or Qualified 03/02/1987 03/20/1995 Applied For 2. Principal Place of Business 2a. Maiting Address 4. FEI Number STREET 4TH STREET 412 N.E. 65-0032612 21 412 N.E. 4TH Not Applicable \$8.75 Additional Suite, Apt. #. etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing FT. LAUDERDAL LAUDERDALE Added to Fees Trust Fund Contribution 23 Country Country 8. This corporation has Lability for intangible tax under s. 199 032 วีวิวิวิ USA IJSA Yes No 24 Florida Statutes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name BLACKBURN, STEPHEN M. Street Address (P.O. Box Number is Not Acceptable) 412 NORTHEAST 4TH STREET 82 FT. LAUDERDALE FL 33301 83 84 City Zio Code 85 67,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered in Attack of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered 11. Pursuant to the provisions of Sections office or reg ed agent, or both in orida Statutes agent Lam 8/5/96 JASON STRAUSS SIGNATURE (NOTE: Biogistered Agr ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)12. OFFICERS AND DIRECTORS 13. DELETE Change 1.1 DILE TITLE STRAUSS, JASON 1.2 NAME **CR2E034** STREET ADDRESS 2519 SUGARLOAF LANE 1.3 STREET ADDRESS FT. LAUDERDALE FL 1.4 C-TY - ST-- ZIP CITY - ST - 7IP Change Addition DELETE TITLE PD 21 TITLE NAME STRAUSS, LOUIS 2.2 NAMI 2519 SUGARLOAF LANE 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 2 4 CITY - ST ZIP CITY - ST - ZIP DELETE 3 1 THTLE Change Addition TITLE ٧D 3.2 NAME KOPEL, ZEV NAME 2519 SUGARLOAF LANE 3 3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 3.4 CHTV - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4 t TITLE TITLE 4 2 NAME NAME STRAUSS, JOSEPH 4.3 STREET ADDRESS STREET ADDRESS 2519 SUGARLOAF LANE FT. LAUDERDALE FL 4.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 5.1 BD F Change TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CHY - \$1 - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6 1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 City - ST- ZIP CITY - ST - ZIP 14. If do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Flor da 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 Brock 13 if changed for on an attachment with an address.

JASOD STRAUSS

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: