FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **M53389** **(6)**

1. Current Name

FORTUNE PRODUCTS, INC.

Principal Place of Business

% WINDMERE CORPORATION
5980 MIAMI LAKES DRIVE
MIAMI LAKES FL 33014

Mailing Address

% WINDMERE CORPORATION
5980 MIAMI LAKES DRIVE
MIAMI LAKES FL 33014

2. Principal Place of Business
21
Street Address
22
City-State
23
24 County 25

2a. Mailing Address
26
Street Address
27
City & State
28
29 Zip 30 Country

3. Date Incorporated or Qualified: **06/05/1987**

3a. Date of Last Report: **01/18/1995**

4. FEI Number: **65-0034740**

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 [X] Yes [ ] No

9. Name and Address of Current Registered Agent

GARRETT, RICHARD G.
% GREENBERG, TRAURIG, ET-AL
1221 BRICKELL AVENUE, SUITE 2000
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is N.G.A. acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to Section 607.1502, 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. The corporation's board of directors hereby accepts the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

12. OFFICERS AND DIRECTORS

PSD [ ] DELETE
HONIG, BURTON A.
5980 MIAMI LAKES DR.
MIAMI LAKES FL

T [ ] DELETE
HEINLEIN, JOHN A
5980 MIAMI LAKES DR.
MIAMI LAKES FL

V [ ] DELETE
SCHULMAN, HARRY D
5980 MIAMI LAKES DRIVE
MIAMI LAKES FL

[ ] DELETE

[ ] DELETE

[ ] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '12

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

[ ] Change [ ] Addition

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director or officer 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 added.

SIGNATURE: John Heinlein JOHN HEINLEIN, TREASURER 1-19-96 (305)362-2611
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Area Code & Daytime Phone Number

CR2E034 (12/95)