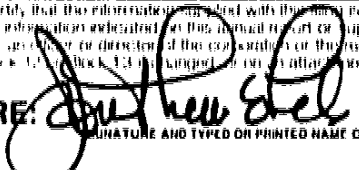


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Morton Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED	
DOCUMENT # M83185 (2)				95 MAY -1 PM 9:16	
1. Corporation Name HALLMARK COMMERCIAL ASSOCIATES, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 16634 SADDLE CLUB ROAD FT. LAUDERDALE FL 33326 US		Mailing Address 16634 SADDLE CLUB ROAD FT. LAUDERDALE FL 33326 US		DO NOT WRITE IN THIS SPACE	
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/31/1988	
21		26 5901 S.W. 111 ST		3a. Date of Last Report 04/19/1994	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number 65-0063614	
23 City & State MIAMI FL		28 City & State MIAMI FL		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 Zip 33156		29 Zip 33156		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent ADICKNAS 16634 SADDLE CLUB ROAD FT. LAUDERDALE FL 33326				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 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 _____					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
14. I, the undersigned, certify that the information furnished with this report is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(2)(b), Florida Statutes. I further certify that the information submitted in 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 13 of this report, or on an attached sheet with an address.					
SIGNATURE:  U.P. 4-28-95 665-9005					