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).

Zip Country Zip Country 2ip Country 30 S. This corporation owes or has paid the cupersonal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered SCHREIBER, GERHARDT A. 890 S. DIXIE HWY. CORAL GABLES FL 33146 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Intentional No Agent 85 Zip Code
Principal Place of Business Meiling Address 5960 SW 57TH AVE MIAMI FL 33143 US 2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 3. Date Incorporated or Qualified 0. 06/03/1988 4. FEI Number 65-0081689 Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 3. City & State 4. FEI Number 65-0081689 5. Certificate of Status Desired 7. Trust Fund Contribution 8. Tribic Corporation was of has paid trust Fund Fund Fund Fund Fund Fund Fund Fund	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Internit year Intangible For Not Applicable Street Required Street Requ
Principal Place of Business Mailing Address S960 SW 57TH AVE MAMI FL 33143 US DO NOT WRITE IN THIS 3. Date Incorporated or Qualified 06/03/1988 2. Principal Place of Business 3. Date Incorporated or Qualified 06/03/1988 4. FEI Number 5. Certificate of Status Desired City & State 2. City & State 3. City & State 3. Country 4. Election Campaign Financing Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution D. Name and Address of Current Registered Agent SCHREIBER, GERHARDT A. 800 S. DIXIE HWY. CORAL GABLES FL 33146 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) City & City & Country City Place of Principal Place of Status Desired Address of New Registered 84 City FL 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 or 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 appearagent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes Signature. Signature, typed or precision near of registered agent and the if applicable (NOTE: Registered Agent algorithms required when remaining) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS A BINAME FRICK, DALE STREET ADDRESS GIYNST-ZIP ALCITY-ST-ZIP ALCITY-ST-ZIP ALCITY-ST-ZIP ALCITY-ST-ZIP	Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees Internat year Intengible Fee No Agent 85 Zip Code
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CITY-ST-ZIP	Change Addition
NAME 6.2 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	•
6.4 CITY-ST-ZIP 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	-
14. Thereby certify that the Information supplied with this filling does not qualify to the exemption stated in security that the Information supplied with this filling does not qualify to the exemption stated in security and in the Information supplied with this filling does not qualify to the exemption stated in security that is a supplied with the Information of the same legal effect as if made und 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 the In Block 12 or Block 13 if changed, or on an attachment with an address.	Ihat the information