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 #** (3)M98657 FINE HOME BUILDING CONSTRUCTION, INC. Principal Place of Business Mailing Address 1431 SW 1ST AVE. 1431 SW 1ST AVE FT. LAUDERDALE FL 33315-1555 FT. LAUDERDALE FL 33315-1555 US 3. Date Incorporated or Qualified 3a. Date of Last Report 09/15/1988 05/01/1995 Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0077622 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5, Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation has liability for intangible tax under s. 199 032 Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 JACKSON, BILLY 815 S.E. 11TH AVE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33316 83 R4 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, Soction 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent's greature required when revisitating) Signature, typical or printed name of registered agent and title if applicable 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8) 13. DELETE Change Addition TITLE 11 100 JACKSON, BILLY 1,2 NAME CR2E034 815 S.E. 11TH AVE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY - ST - ZIP 14 CHY-ST-ZE DELETE Change ____ Addition TITLE 2 I TITLE WESCOTT, GUY THOMAS NAME 22 NAME 829 S.W. 9TH TERR STREET ADDRESS 2.3 STREET ADDIRESS FT. LAUDERDALE FL 2 4 CITY - ST - ZIF DITY ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-2IF DELETE TITLE 4.1 TITLE Change Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - Z P TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5 3 STHEET ADDRESS CITY-ST-ZIP 5 4 C(1) - \$ F - Z P DELETE TITLE 6.1 THILE Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS

14. I 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). 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 are 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 have the present or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that have the present or the receiver or trustee. that my name appears in

6.4 City - St - 7.P.

SIGNATURE:

DITY-ST-7/P

6-8-96 305 761-3712