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Apr 04 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N22125 (1)

1. Corporation Name
FARQUHARSON ACLF INC.



Principal Place of Business: EVELYN FAROHARSON, 4363 NW 202ST, MIAMI FL 33055
Mailing Address: EVELYN FAROHARSON, 4363 NW 202ST, MIAMI FL 33065-1529

3. Date Incorporated or Qualified: 08/19/1987
3a. Date of Last Report: 04/27/1996

2. Principal Place of Business: 21 Evelyn Farquharson, Suite, Apt., etc. 4363 NW 202 St, City & State: Coral City m FLA, Zip: 33055, Country: Dade
2a. Mailing Address: 26 H 363 NW 202 St, Suite, Apt. #, etc. Coral City Miami, City & State: FLA Dade, Zip: 93055, Country: 30

4. FEI Number: 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: Yes No

9. Name and Address of Current Registered Agent: FARQUHARSON, EVELYN, 4363 NW 202ST, MIAMI FL 33055

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 617.0502 and 617.1508, 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 and am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: Evelyn Farquharson, DATE: 2-6-97

Table with 5 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETED checkbox. Rows include P/T FARQUHARSON, EVELYN; VDP PARKINSON, KEITH; SD FARQUARSON, DAVID.

Table with 5 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP, and checkboxes for Change and Addition. Rows include Evelyn Farquharson, Keith Parkinson, David Farquharson.

14. I do 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 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 Block 13 if changed, or on an attachment with an address.

SIGNATURE: Evelyn Farquharson 2/6/97

CR2E037 (9/96)