


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # 1. Corporation Name Green Wind, Inc. N95000006043		

Principal Place of Business	Mailing Address 2225 Funston St. Hollywood, Fla. 33020
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	25
29	30

3. Date Incorporated or Qualified Dec. 19, 1995	3a. Date of Last Report June 25, '96
FEL Number 65-0629730	24111232
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent John Oliver 2225 Funston St. Hollywood, Fla.	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
85	Zip Code

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

SIGNATURE _____ (Signature typed or printed name of registered agent and title, if applicable) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	former director <input checked="" type="checkbox"/> DELETE
NAME	Eva Levin
STREET ADDRESS	3301 SW 13 St. E-150
CITY - ST - ZIP	Gainesville, Fla. 32608
TITLE	former director <input checked="" type="checkbox"/> DELETE
NAME	Kevin Ryan
STREET ADDRESS	1216 SW 2nd Ave #31
CITY - ST - ZIP	Gainesville, Fla. 32608
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	DIRECTOR (remaining) <input type="checkbox"/> DELETE
NAME	John Oliver
STREET ADDRESS	2225 Funston St.
CITY - ST - ZIP	Hollywood, Fla. 33020
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME	John Kelly
13 STREET ADDRESS	4421 SW 22 St.
14 CITY - ST - ZIP	Fort Lauderdale, Fla. 33317
21 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
22 NAME	Charles Ness
23 STREET ADDRESS	2400 W. Broward Blvd. # 924
24 CITY - ST - ZIP	Fort Lauderdale, Fla. 33312
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing 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 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 of this report, changed, or on an attachment with an address.

SIGNATURE:  **JOHN OLIVER** Sept. 10, '96 (305) 921-6504
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Amended Annual Report
(for the purpose of deleting 2 directors and adding 2 directors)

CR2E037 (3/96)