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.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT** # P36726 (8)FRE-MAC INDUSTRIES, INC. Maining Address Principal Place of Business POST OFFICE BOX 95488 POST OFFICE BOX 95488 OKLAHOMA CITY OK 73143 OKLAHOMA CITY OK 73143 3a. Date of Last Report 3. Date incorporated or Qualified 01/19/1995 12/16/1991 4. FEI Number Applied For 2a. Mailing Address Principal Place of Business Not Applicable 73-0774641 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199 032 Ζip Country Zιρ Florida Statutes Yes No 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WILLIAMSON, MIKE Street Address (P.O. Box Number is Not Acceptable) 82 15400 CORPORATE ROAD WEST JUPITER FL 33478 83 Zip Code 85 84 City 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. OATE SIGNATURE (NOTE: Registered Agent's goalure required when reinstating): Signature 1, by the piretinane of a gistine Lagent and little diapproache ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 TITLE TITLE CR2E034 1.2 NAME MCDONALD, W. A. NAME 1.3 STREET ADDRESS 10714 S. BROADWAY SUBFEIT ADDRESS 1.4 CiTY - ST - ZIP OKLAHOMA CITY OK CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME MCDONALD, MARK S. NAME 23 STREET ADDRESS **4002 RIDGELINE** STREET ADDRESS NORMAN OK 2 4 CITY - S\* - ZIP CITY - ST - ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME MCDONALD, DARRELL W. NAME 3.3 STREET ADDRESS 2369 NIGHT SHADE LANE STREET ADDRESS FREMONT CA 34 CITY-SI-ZIP CITY-ST-ZIP Change Addition DELE 1E 4 1 TITLE THILE 4.2 NAME LEONARD, TONNIE M NAME 4.3 STREET ADDRESS 2505 SW 124TH STREET STREET ADDRESS OKLAHOMACITY OK 44 CITY - SY-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 DILE TITLE 5.2 NAME HOLLAND, STEVE NAME 1724 ORIOLE CT. 5 3 STREET ADDRESS STREET ADDRESS 5.4 CiTY - \$1 - ZIP **NORMAN OK** CITY-ST-ZIP Change Addition DELETE 61111LE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. I do hereby cert by that the information supplied with this hing is voluntarily turnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I furface 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 arm an officer or director of the conforation of the receiver or justed empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 124. Block 13 if changed or open stachment with an address.

SIGNATURE:

STEVE

Ainiees "

6/5/96 (405)632-1575