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 CORPORATION



FLORIDA DEPARTMENT OF STATE

	JAL REPO 1996	ORT (Secret DIVISION OF	ary of State CORPORA	TIÓNS			
DOCUI 1. Corporation		# P930	00000	6372 (5)				
S. DIXI	E, INC.						I HERILGEN HIT IBIRE HIKI ROUN BONK BE	INI Ba nd Bank B il	14 (1)(() (186) (48) (68)
Principal Place of Business Maining Address									
1105 TANNES				1105 TANNER DRIVE					
TALLAHASSEE FL 32310		17	TALLAHASSEE FL 32310			3. Date Incorporated or Qualified 01/27/1993		of Last Report //1995	
2. Principal P	lace of Busin	ess		Mailing Address			4. FEI Number	1 00,01	Applied for
Suite, Apt	#, etc.		26	Suite, Apt. #. etc.			59-3161494 5. Certificate of Status Desired	\$	Not Applicable 8.75 Additional
City & State			27	City & State			6. Election Campaign Financing		Fee Required \$5.00 May Be
3			28				Trust Fund Contribution		Added to Fees
Zip !4		Country	29	Zip	Gour 30	ntry .	8. This corporation has Lability for Florida Statutes		unders 199 032. – Vo
4		and Address of 0		ered Agent	30		10. Name and Address of New Re		
Di	XIE, SAMUE	il I II				81 Name			
1105 TANNER DR				8:		82 Street Add	Address (P.O. Box Number is Not Acceptable)		
TA	ULAHASSE	E FL 32310			ŀ	83			
						1			
					-	84 City	<u> </u>		S Zin Code
11. Pursuant office or r	to the provisi registered ag	ions of Sections 60 ent, or both, in the	07.0502 and 60 State of Florida	7.1508, Fiorida Statu a Such change was		84 City ove named corporation	poration subrets this statement for the p tion's board of directors. I hereby accept		2 Zip Code nging its registered lent as registered
SIGNATURE		or printed name of reger	जिल्ला बच्चा विभाग शिला	applicable (N	utes, the abo authorized lorida Statu	7		PL Juniose of chait the appointm	nging its registered lent as registered
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made under oath, that I am an officer or director of the corporation or the receiver or trustee em that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING-OFFICER OR DIRECTOR

2-31-96 921-4533