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
ANNUAL REPORT
1996

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

DOCUMENT # **P93000051989 (0)**

1. Corporation Name
PREMIER REAL ESTATE SERVICES, INC.

Principal Place of Business	Mailing Address
4492 SOUTHSIDE BLVD SUITE 100 JACKSONVILLE FL 32216	4492 SOUTHSIDE BLVD SUITE 100 JACKSONVILLE FL 32216

2. Principal Place of Business	2a. Mailing Address
21 5393 Roosevelt Boulevard	26 5393 Roosevelt Boulevard
Suite, Apt. #, etc. 22 Suite 2	Suite, Apt. #, etc. 27 Suite 2
City & State 23 Jacksonville, FL 32210	City & State 28 Jacksonville, FL
Zip 24 32210	Zip 29 32210
County 25 Duval	County 30 Duval

3. Date Incorporated or Qualified: **07/26/1993**
3a. Date of Last Report: **01/25/1995**
4. FEI Number: **59-3190978**
Apparent Ref. No. If 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
7. This Corporation Is Subject to Chapter 617, Florida Statutes: [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

MALLARD, PATRICIA A
4492 SOUTHSIDE BLVD
SUITE 100
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 5393 ROOSEVELT BOULEVARD
83 SUITE 2
84 City: Jacksonville FL 85 Zip Code: 32210

11. Pursuant to the provisions of Section 607.0502, Florida Statutes, the undersigned corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The name and address of the registered office and the name and address of the registered agent, after the change, are set forth in this statement. Having been named registered agent and to accept service of process for the above stated corporation, at the place designated in this statement, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent pursuant to Section 607.0505, Florida Statutes.

SIGNATURE: Patricia A. Mallard 7/19/96
Date

12. OFFICERS AND DIRECTORS

TITLE	PSD	[ ] DELETE
NAME	MALLARD, PATRICIA A	
STREET ADDRESS	2755 SCOTT MILL PLACE	
CITY-ST-ZIP	JACKSONVILLE FL 32223	
TITLE	VTD	[X] DELETE
NAME	GUIRAGOSSIAN, SHOGHIG	
STREET ADDRESS	11005 CHALLEUX DR S	
CITY-ST-ZIP	JACKSONVILLE FL 32225	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE		[ ] Change [ ] Add
1 NAME		
1 STREET ADDRESS		
1 CITY-ST-ZIP		
2 TITLE		[ ] Change [ ] Add
2 NAME		
2 STREET ADDRESS		
2 CITY-ST-ZIP		
3 TITLE		[ ] Change [ ] Add
3 NAME		
3 STREET ADDRESS		
3 CITY-ST-ZIP		
4 TITLE		[ ] Change [ ] Add
4 NAME		
4 STREET ADDRESS		
4 CITY-ST-ZIP		
5 TITLE		[ ] Change [ ] Add
5 NAME		
5 STREET ADDRESS		
5 CITY-ST-ZIP		
6 TITLE		[ ] Change [ ] Add
6 NAME		
6 STREET ADDRESS		
6 CITY-ST-ZIP		

CR2E034 (3/96)

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an address, with the exception of the resignation of the registered agent.

SIGNATURE: Patricia A. Mallard 7/19/96 (904) 384-2929
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR