SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. APPROVED AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) AND PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT 1996 SEP -3 AM 9: 13 Secretary of State 1996 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA P93000064257 (7) DOCUMENT # YESTERLAND, INCORPORATED Principal Place of Business Mailing Address 6222 ALTON RD 6222 ALTON RD MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 3. Date Incorporated or Qualified 3a. Date of Last Report 09/10/1993 07/25/1995 Principal Place of Business 2. 2a. Mailing Address EEL Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Žφ Country Country 8. This corporation has liability for intangible tax under s. 199 03? 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name STEINBERG, PAUL B 767 ARTHUR GODFREY RD 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33140 83 84 City 85 Zip Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed many of regulating agent and title if applicable (NOTE Projectered Agent signature required when rehistating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (3/96)DELETE TIFLE 1 1 TITLE Change Addition NAME SULTAN, NICOLE 1.2 NAME CR2E034 STREET ADDRESS 6222 ALTON RD 1.3 STREET ADDRESS MIAMI BEACH FL 33140 CITY - ST - ZIP 14 CITY - ST ZIP TITLE DELETE 21 71718 300001946023 NAME 2.2 NAME -09/12/96--01090--005 STREET ADDRESS 2.3 STREET ADDRESS ****225.00 ****225.00 CITY-ST-ZIP 2 4 CHY - ST - ZIP TITLE [] DELETE 3.1 THEE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7IP 34 CITY-S1-71P DELETE TITLE 4.1 T-TLF Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4.0(1Y - ST - ZIE TITLE DELETE 5.1 THILE Change Addition NAME 5 2 NAME STREET #30RESS 5.3 SIREFT ADDRESS CITY-ST ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 DUE I Addition NAME 4 6.2 NAME

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

July 3rd 1996 Considerations.

gran attachment with an address

F SIGNING OFFICER OR DIRECTOR

STREET ADORESS CITY-ST-ZIP

SIGNATURE:

that my name appears in Block 12 or Block 13 if changed