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 # P93000069113

1. Corporation Name
SOBETS CORP.

Principal Place of Business
2459 So Bayshore Dr.
Miami, FL 33133

Mailing Address
P.O. Box 161086
Miami, FL 33116

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 9/30/93
3a. Date of Last Report
4. FEI Number: 65-0508044 Applied For / Not 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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ✓ Yes [ ] No

9. Name and Address of Current Registered Agent
Cohen, Berke, Bernstein, Brodie, etal
2601 So. Bayshore Dr. 19th Floor
~~Terremark Centre~~
Miami, FL 33133

10. Name and Address of New Registered Agent
81 Name: Mario F. Rodriguez
82 Street Address (P.O. Box Number is Not Acceptable): 2459 So Bayshore Dr.
83
84 City: Miami
FL 85 Zip Code: 33133

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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 board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of s. 607.0505.

SIGNATURE: [signature] 7/1/96

12. OFFICERS AND DIRECTORS

TITLE	PD	[ ] DELETE
NAME	Rodriguez, Mario F.	
STREET ADDRESS	2459 So Bayshore Dr.	
CITY-ST-ZIP	Miami, FL 33133	
TITLE	STD	[ ] DELETE
NAME	Keelor, Richard H.	
STREET ADDRESS	2501 Brickell Apt 903	
CITY-ST-ZIP	Miami, FL 33129	
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 (blank)

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***233.75

7-11-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and that ... further certify that the information ... made under oath; that I am an officer or director of the corporation ... and that my name appears in Block 12 ...

SIGNATURE: [signature] 6/10/96 305 536-6111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)