SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

## **FILED** AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 09 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P93000077120 (2) 1. Corporation Name THIS GENERATION, INC. Principal Place of Business Mailing Address 3271 W BROWARD BLVD 4570 NW 70TH AVE FORT LAUDERDALE FL 33311 LAUDERHILL FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>11/03/1993</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 5.0845734 applied fo 21 26 Not Applicable Sulte, Apt. # Suite, Apt. #, et \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Žip Country Соипп Zip 8. This corporation owes or has paid the current year intangible 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LLOYD, JACQUELINE 4570 NW 70TH AVE 82 Street Address (F.O. Box Namber is Not Acceptable) LAUDERHILL FL 33319 83 84 City 85 Zip Code 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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (2/38)OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 1.1 TITLE TITLE Change Addition U DELETE CR2E034 LLOYD, JACQUEUNE 1.2 NAME NAME **4570 NW 70TH AVE** 1.3 STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE \_\_\_ Change \_\_\_ Addition LLOYD, GLENDA NAME 2.2 NAME 3269 W BROWARD BLVD STREET ADDRESS 2 3 STREET ADDRESS FT LAUDERDALE FL 33311 CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE ARRONDA, JACQUINTA NAME 3.2 NAME 3651 N.W. 2ND STREET STREET ADDRESS 3 3 STREET ADDRESS FT. LAUDERDALE FL 33311 CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE JARON. LEFRAN NAME 4.2 NAME 2541 NW 56TH AVE STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL 33313 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE TITLE DELETE 2000025858**7** NAME 5.2 NAME -07/13/98--01004--021 STREET ADDRESS 5.3 STREET ADDRESS \*\*\*400.00 CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 100002585841 6.2 NAME NAME

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f). 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attention with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

6/20/90 (9ry) 485-622

-07/13/98--01004--020

\*\*\*150.00