SECOND	NOTICE: CORPORATION WILL	BE DISSO	LVED ON OR AFTI	R AUGUST 7, 1996.		
PROFIT CORPORATION ANNUAL REPORT 1996		ALL STATE OF THE S	SSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # P94000010572 (3)						
•	AR ENTERPRISES, INC.		(0	•		
V 12 (8 18 (2)	ar Emiliato, 1140.		,		I INDIVERSI INE SENSI DESIN DESIN DESIN DESIN DE	## 1111
Principal Place	e of Business	Ma	iling Address			
20613 N.W. 2ND AVE. 20613 N.W. 2ND AVI MIAMI FL 33169 MIAMI FL 33169						
					3. Date Incorporated or Qual-fied 02/09/1994	3a. Date of Last Report 07/11/1995
_2, Principal Pt 21]	ace of Business	2a. 26	Mailing Address		4. FEI Number 65-0466647	Applied For
Suite, Apt. :	#, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State	2	27	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
Zip	Country		Zip	Country	Trust Fund Contribution 8. This corporation has liability for in	Added to Fees htangible tax under s 199 032
24	25 9. Name and Address of Cur	29 rent Registe	ered Agent	30	Ftorida Statutes 10. Name and Address of New Reg	Yes No
agent. I an	n the provisions of Sections 607 0 gistered agent or both, in the Sta n familiar with, and accept the ob				poration submits this statement for the purion's board of directors. I hereby accept t	rpose of changing its registered the appointment as registered
	Signature Type 1 or pintled numerof registered			DTE. Registered Ager I signature requ		ΓοΑ* ξ
12.	OFFICERS /	AND DIREC	TORS DELETE	13. 11TITLE	ADDITIONS/CHANGES TO OFFICE	
NAME	WASSEL, FOUAD H.M.			12 NAME		Change Addition
STREET ADDRESS	2900 ARCADIA DRIVE MIRAMAR FL			1.3 STREET ADDRESS		
DILE DILE	WIN ANNAUL L.		DELETE	2.1 TILE		Change Addition
NAME			—	2 2 NAME		Change Aug-(1011
STREET ADDRESS				2 3 STREET ACORESS		
CITY-ST-ZIP TITLE			DELETE	2 4 CITY - ST - ZIP		
NAME				3 1 TITLE 3 2 NAME		Change Addition
STREET ADDRESS				3 3 STREET ADDRESS		
CITY-ST-ZP				34 CITY-ST-7IP		
TITLE			DELETE	4 1 Title		Change Addition
NAME STREET ADDRESS				4 2 NAME		
CITY-ST-ZIP				4.3 STREET ADDRESS		
TITLE			DELETE	4 4 C(FY - ST - ZIP 5 1 TITLE		Change Addition
NAME				5 2 NAME		- ourside - vonditil
STREET ADDRESS				5 3 STREET ADDRESS		
CITY - ST - ZIP				5 4 CITY - \$1 - 7IP	<u> </u>	
TITLE			DELETE	6 1 THILE		Change Addition
NAME STREET ADDRESS				6 2 NAME		
STREET ADDRESS				6 3 STREET ADDRESS		

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 off certify director of the corporation or the receiver or trustee empowered to execute this report as required by Chupter 617, Florida Statutes, and that my name appears in Block 12 if Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE

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