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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000013308 (9)

1. Corporation Name

YOUNG'UNS ENTERPRISES, INC.



Principal Place of Business

41 N.W. 12TH ST.
FLORIDA CITY FL 33034

Mailing Address

41 N.W. 12TH ST.
FLORIDA CITY FL 33034

3. Date Incorporated or Qualified

02/17/1994

3a. Date of Last Report

07/10/1995

2. Principal Place of Business

2a. Mailing Address

21 830 NW 9 ST

26 P.O. BOX 901088

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 HOMESTEAD FL

28 HOMESTEAD FL

Zip

Country

Zip

Country

24 33030

25 DADF

29 33030

30 DADF

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PEREIRA, JOSEPH A JR
10000 S.W. 72ND ST.
#4700
MIAMI FL 33173

81 Name

GERALD E. CREASMAN

82 Street Address (P.O. Box Number is Not Acceptable)

12374 SW 82 Avenue

83

84 City

Miami

FL

85 Zip Code

33156

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. 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)

4/16/96

12. OFFICERS AND DIRECTORS

TITLE	P	DELETED
NAME	SONJIA NORRIS	
STREET ADDRESS	41 NW 12TH STREET	
CITY - ST - ZIP	FLORIDA CITY FL 33034	
TITLE	STD	DELETED
NAME	TIMOTHY L. BUFFINGTON	
STREET ADDRESS	41 NW 12TH STREET	
CITY - ST - ZIP	FLORIDA CITY FL 33034	
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETED
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	Change	Addition
1.2 NAME	SONJIA NORRIS		
1.3 STREET ADDRESS	830 NW 9 ST		
1.4 CITY - ST - ZIP	HOMESTEAD FL 33030		
2.1 TITLE	STD	Change	Addition
2.2 NAME	TIMOTHY BUFFINGTON		
2.3 STREET ADDRESS	830 NW 9 ST		
2.4 CITY - ST - ZIP	HOMESTEAD FL 33030		
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Sonja Norris, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-96 (305) 246-4848
Date Daytime Phone #

CR2E034 (12/95)