SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P94000018063 (5) **DOCUMENT #** MIDAS HOLDINGS CORP. Principal Place of Business Mailing Address 1370 EAST TERRA MAR DRIVE 1370 EAST TERRA MAR DRIVE POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 3. Date Incorporated or Qualified 3a. Date of Last Report 03/08/1994 02/08/1995 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 21 26 65-0483724 Not Applicable Suite, Apt. #. etc. Suite Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 25 🗶 Yes 🗌 No 24 29 30 Elorida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DASSLER, MICHAEL 1370 EAST TERRA MAR DRIVE Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33062 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 prectors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: type-disciplinated name of registered agost and tricit applicable (NOTE: Registered Agent signature required whole resistating) 12. OFFICERS AND DIRECTORS (96/E)13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change 1.1 TITLE Addition NAME DASSLER, MICHAEL 1.2 NAME 1370 EAST TERRA MAR DRIVE STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33062 CITY - SI - ZIP 1.4 CiTY - ST - ZIP DELFTE TITLE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34 CITY - ST - 71P TITLE DELE 16 Change Addition 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 C:TY - ST - ZIP DELETE TITLE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C!TY - ST. ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 6 4 C1TY - ST- ZIP 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 1 further certify that the information indicated on this arrival 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

SIGNATURE:

that my name appears in Block 12 or Block

GNATURE AND TYPED OR PRINTED NAME OF SONING OFFICER OR DIRECTOR

H) Chael Dase Lex

hment with an address

7-24-96

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