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



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

1990	600 1		
DOCUMENT #	504000400		

OCUMENT # P94000019831 (4)

Principal Plac	LEAF REAL ESTATE SERVICE OF Business	Mailing A	X 030310			
FORE CAUDE	ERDALE FL 33301	FORT L	AUDERDALE FL 33	3303-0310	3. Date Incorporated or Qualified	3a. Date of Last Report
					03/07/1994	05/01/1995
	Place of Business		ng Address		4, FEI Number	Applied For
21 /560 Suite, Apt	East las Clas Blv		A		65-0491761	Not Applica
22 Suit	e 200 · 0881ce#1	27	. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additiona Fee Required
City & Stat	Couderdale FL	City 8	& State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33;	301 25 Brown	Zip 29		Country 30	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032,
	9. Name and Address of Curre	ent Registered	Agent		10. Name and Address of New Re	gistered Agent
LA	ING, LOUANN H			81 Name		
FO	12 E. Broward Blvd. Ste. 10 PRT Lauderdale FL 33301			83 Suit	+ 200, 08nze#1	FI 85 29.3930
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the State amfamiliar with, and accept the oblig	02 and 607.150 e of Florida_Suc	8, Florida Statutes	s the above-named corp	poration submits this statement for the pu	urpose of changing its registere
agent. Ca SIGNATURE	Taului Nalidi	pations of Section	on 607.0505, Flori	restdent	Ju	LIC 26, 1996
	Sign core, typed or printed having it registed as		LE CHOTE	Test Clint Registered Agent signature requi	red when reinstating)	UNE 26, 1996
SIGNATURE	Sign core, typed or printed having it registed as	pations of Sections And the Applica ND DIRECTORS	LE CHOTE	restdent	Ju	UNE 26, 1996
SIGNATURE	Sign ore hiped or printed as OFFICERS AN D, PVTS LANG, LOUANN HAYDEN	ND DIRECTORS	G COR	Registered Agent signature required 13.	red when reinstating)	CERS AND DIRECTORS IN 12
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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 Statutos 1 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 617, Florida Statutes, and that my name appears a Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE TO CALLE TO THE OFF SIGNED OFFICER OR DIES INCOME

July 36, 1926 (954)-522-2820