FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT

1996



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

P94000034385 (2) DOCUMENT #

WEINER F	CABAII V	שואות וחש	$\triangle \Box \Box \Box$

Mailing Address Principal Place of Besiness 550 S. OCEAN BLVD. 550 S. OCEAN BLVD. **BOCA RATON FL 33432 BOCA RATON FL 33432** 3a. Date of Last Report 3. Date incorporated or Qualified 05/06/1994 03/15/1995 4 FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 22-3303998 Not Applicable 21 \$8.75 Additional Scite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Country 210 Yes VNo 29 30 Florida Statutes 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name THE PRENTICE-HALL CORPORATION SYSTEM. INC. Street Address (P.O. Box Number is Not Acceptable) 82 1201 HAYS ST. 83 **SUITE 105** TALLAHASSEE FL 32301 Zip Code 84 City 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DATE Support is introduced peak of mean of regularized agent and title diagnostication (NOTE: Registered Agent signature registred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELFIE 1 1 Till F 71117 WEINER, HOWARD B 1.2 NAME 550 SO OCEAN BLVD., APT. 207 1.3 STREET ADORESS STRUET ADDRESS **BOCA RATON FL** 1.4 City - ST-ZiP Cith - 51 - 7i2 Change Addition DELETE 2 1 TITLE 11 LF 2.2 NAME NAME STREET ACORESS 2.3 STREET ADORESS 2 4 CITY - ST - ZIP CITY-ST ZIE DELETE 3 1 TITLE ☐ Change ☐ Addition THEF 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 City - St - ZiP 011 - ST- ZP Change Addition [] DELETE 4 1 TITLE 1.01 4.2 NAME NAM 4.3 STREET ADDRESS STREET A TORIESS 4.4 CITY - ST - ZIP CHY ST 70 Change Addition [] DELETE 5 1 TILLE TO F 5.2 NAME MARKE 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP DITY ST 70P DELETE Change Addition 6.1 THUE 1.00 NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS.

6.4 CITY - S1 - ZIP

14. Lide 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 arinual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outh, 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

CCY St. 7le

appears in Block 12 or Block B. Wener

(12/95)CR2E034