SECOND NOTICE: CORPORATION ILLE DISSOLVED DO NO A FTER AUGUST 7, 1996.  AMOUNT DUE NO REPORTATION CORPORATION PROPERTY. 1996.  PROFIT CORPORATION ANNUAL REPORT 1996  ANNUAL REPORT 1996  A BETTER STARVING STUDENT MOVERS INC.  Principal Place of Business Majeing Address.  50 St 390 ST BAY B FT. LAUDERDALE FL 33316  FT. LAUDERDALE FL 3316  PT. LAUDERDALE FL 3316  PT. LAUDERDALE FL 33316  PT. LAUDERDALE FL 33316  T. LAUDERDALE FL 33316  PT. LAUDERDALE FL 33316  A FEE Timped Place of Business Suite. April 4, etc.  City & State  A FEE Timped Confedence Custified (States Position)  State April 4, etc.  City & State  A Fee Timped Confedence Custified (States Position)  State April 4, etc.  City & State  City & State  City & State  City & State  A Fee Timped Confedence Custified (States Position)  State April 4, etc.  State April 4, etc.  City & State  State April 4, etc.  City & State  City & State  A Fee Timped Confedence Classified (States Position)  State April 4, etc.  State April 4, etc.  State April 4, etc.  City & State  City & State  City & State  City & State  A Fee Timped Confedence Classified (States Position)  State April 4, etc.  City & State  City & State  City & State  Danial File April 4, etc.  City & State  A Fee Timped Confedence of New Registered Agent  City & State  City	SECOND I	INTICE: COL	DODATION WILL RE	DISSOLVED OR	OR AFTER AL	IGUST '	7. 1	996.				
ANNUAL REPORT 1996  DOCUMENT # P94000038027 (6)  A BETTER STARVING STUDENT MOVERS INC.  Principal Place of Business 501 SE 3980 ST. BAY 8 FT. LAUDEROLE FL 33316  P. D. BOX 22381 FT. LAUDEROLE FL 33316  2. Principal Place of Business 2. Mailing Address 2. Mis ling Address 3. Date Incorporated or Outside 1 98/06/1895  2. Principal Place of Business 2. Mis ling Address 3. Date Incorporated or Outside 1 98/06/1895  2. Principal Place of Business 2. Mis ling Address 3. Date Incorporated or Outside 1 98/06/1895  3. Date Incorporated or Outside 1 98/06/1895  A FER Number 65-0497753  But Applied For 1 South Applied Full Applied Applied	PROFIT FLORIDA DEPARTMENT						FST	E: \$3/0.)				
DOCUMENT # P94000038027 (6)  A BETTER STARVING STUDENT MOVERS INC.  Principal Place of Business  Maling Address  501 SE 38RD ST. BAY B FT. LAUDERDALE FL 33316  Pr. D. BOX 22361 FT. LAUDERDALE FL 33316  3. Date incorporated or Qualified  OS/16/1994  3. Date incorporated or Qualified  3. Date incorporated or Qualified or Qualified or Qualified in Qualified							1					
DOCUMENT # P9400038027 (6)  A BETTER STARVING STUDENT MOVERS INC.  Principal Place of Business  50 St 3970 St. BAY B FT. LAUDEROALE FL 33316  FT. LAUDEROALE FL 33316  FT. LAUDEROALE FL 33316  FT. LAUDEROALE FL 33316  26  27  28  29  29  20  City & State  City & State  Country  29  20  20  20  20  21  20  21  20  City & State  Country  20  20  20  20  20  20  20  20  20  2							TION	VIC.				
A BETTER STARVING STUDENT MOVERS INC.  Principal Place of Business  Mailing Address  501 SE 3380 ST. BAY B FT. LAUDERDALE FL 33316  8. Date Incorporated or Qualified  05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  3. Date Incorporated or Qualified 05/16/1994  5. Certificate of Status Desired 6. Election Campaign Financing 5. Status S	· 1996 DIVISION OF CORPORATIONS											
Principal Place of Business  501 SE 33RD ST. BAY 8 FT. LAUDERDALE FL 33316  2. Principal Place of Business  3. Date Incorporated or Quillified  3. Date Incorp	DOCUN 1. Corporation	MENT :	# P9400	003802	27 (6)							
Principal Place of Business  50	A BETTER STARVING STUDENT MOVERS INC.											
3. Date incorporated or Qualified   Sa. Date of Last Report   O5/16/1994   O5/06/1995   O5/16/1994   O5/16/1994   O5/06/1995   O5/16/1994   O5/06/1995   O5/16/1994   O5/06/1995   O5/06/19	Principal Place of Business Mailing Address									# #### ####   ###	10 Mars (1521) (001 (001	
2. Principal Place of Business 2. Mailing Address 3. FE! Number 4. FE! Number 5. Certificate of Status Desired 6. Certificate of Sta	OUT OF BOTTO OT DATE OF					6						
21 26 6 65-0497753 Not Applicable  22 26 Suite Apt #, etc Suite Apt #, etc 5. Certificate of Status Desirco Fee Required  22 City & State 28 Country State Frust Fund Contribution Added to Fees  23 26 Suite Apt #, etc 5. Certificate of Status Desirco Fee Required  24 City & State Frust Fund Contribution Association in Sp. 5.00 May Be Added to Fees  25 29 Country State Food association in Sp. 5.00 May Be Added to Fees  26 Suite Apt #, etc 5. Election Campaign Financing Added to Fees Food association in Sp. 5.00 May Be Added to Fees Food assoc									3. Date Incorporated or Qualified 05/16/1994			
Suite, Apt #, etc   Suite Apt #, etc   Suite Apt #, etc   S. Certificate of Status Desired   S8.75 Additional Fee Required   Fee Required   Fee Required   Fee Required   Fee Required   Fee Required   S5.00 May Be Added to Fees   Fundamental Fee Required   Added to Fees   Added to Fees   Added to Fees   Fundamental Fee Required   Fundamental Fee Required   S6. Election Campaign Financing   S5.00 May Be Added to Fees   Fundamental Fee Required   Fundamental Fee Required   Fundamental Fee Required   S6. Election Campaign Financing   S5.00 May Be Added to Fees   Fundamental Fee Required   Fundamental Fee Require		lace of Busine	ess	<u> </u>						Not Applicable		
City & State    City & State   City & State   City & State   City & State   City & State   City & State   City & State   Country   Zip   Country   State   City   City   State   City   City   State   City   C	Suite, Apt	#, etc		<u> </u>					5. Certificate of Status Desired	<u> </u>	Fee Required	
Some and Address of Current Registered Agent   10. Name and Address of New Registered Agent	City & State	e		´	<del></del>				Trust Fund Contribution		Added to Fees	
9. Name and Address of Current Registered Agent  CAMPBELL, WILLIAM 1293 SW 2 AVE DANIA FL 33004  82 Street Address (P.O. Box Number is Not Acceptable)  83  84 City  FL 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 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, and accept the obligations of. Section 607 0505, Florida Statutes.  SIGNATURE  Signature type for pealed name of togetic diagraphs due. INOTE 16 growted Agents graduler register Abent receivables.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TILLE  D DELETE  11. ITILE  D CAMPBELL, WILLIAM  STREET ADDRESS  1293 SW 2 AVE  13 STREET ADDRESS  CITY-ST-ZIP  DANIA FL 33004  CRADBE L, WILLIAM  STREET ADDRESS  CITY-ST-ZIP  DANIA FL 33004  CRADBE L, Addition  Change L Addition  Change			Country	<b>⊢</b> ¬			ntry			ntangible tax	under s 199 032,	
CAMPBELL, WILLIAM 1293 SW 2 AVE DANIA FL 33004  82 Street Address (P.O. Box Number is Not Acceptable)  83   84 City   FL   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 directors. Thereby accept the appointment as registered agent 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature by the provisions of section agent and the darpointment as registered depretaged to be provided agent a						30			LI	J		
11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Fronta Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent 1 am familiar with, and accept the obligations of. Section 607 0505, Florida Statutes  SIGNATURE  Signature to professional registered agent am familiar with, and accept the obligations of. Section 607 0505, Florida Statutes  SIGNATURE  Signature to professional registered agent and the dispensional third appearance in the first agent ag	<b></b>			nt Registered At	Jesu		81	Name	To, Italia and Italia	r		
DANIA FL 33004  83  84 City  FL  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 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 it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature hypertox professional profession	1293 SW 2 AVE						20 Co. Markey (20 Down Mumber in Not Accordable)					
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LINSOJE   AGGGGG							3 STREET ADDRESS 1220 S.F. 18T AUE					
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CR2E034 (3/96) 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CHTY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TO LE TITLE 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY - ST - ZIP City-St-ZIP Change \_\_\_ Addition DELETE 4 1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 C+TY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - S1 - ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME 6 3 STREET ADDRESS 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 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 it 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 in Block 12 or Block 13 if changed, or open attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR BITCHER.

6/12/96 (954) 7680108