FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

APPROVED AND FILED
95 MAY -1 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000041597 (3)

1. Corporate Name
POWELEIT & ASSOCIATES, INC.

Principal Place of Business
3956 NW 56TH STREET
COCONUT CREEK FL 33073

Mailing Address
3956 NW 56TH STREET
COCONUT CREEK FL 33073

3. Date Incorporated or Qualified: 05/24/1994
3a. Date of Last Report:

2. Principal Office Address
21 6574 N. St Rd 7
22 Suite 114
23 Coconut Creek, Fl.
24 33073 25 USA

2a. Mailing Address
26 6574 N. State Rd 7
27 Suite 114
28 Coconut Creek, Fl.
29 33073 30 USA

4. FEI Number: 65-0500326 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
POWELEIT, CAROLE
3956 NW 56TH STREET
COCONUT CREEK FL 33073

10. Name and Address of New Registered Agent
81 Name: Jerry Schechter
82 Street Address (P.O. Box Number is Not Acceptable): 315 Southeast 7 Street
83
84 City: Ft. Lauderdale FL 85 Zip Code: 33301

11. Pursuant to the provisions of 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 Florida Statutes.

SIGNATURE: [signature] 4/25/95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	POWELEIT, CAROLE
STREET ADDRESS	3956 NW 56TH STREET
CITY-ST-ZIP	COCONUT CREEK FL 33073
TITLE	Vice President
NAME	Tom Crowder
STREET ADDRESS	3956 N.W. 56 St
CITY-ST-ZIP	Coconut Creek, Fl. 33073
TITLE	~~[illegible]~~
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	Treasurer
NAME	Howard Robert Poweleit
STREET ADDRESS	4848 N.W. 24 Court #205
CITY-ST-ZIP	Lauderdale Lakes, Fl. 33319

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
(blank: Change / Addition)

14. I the undersigned, certify that the information supplied with this filing 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.

SIGNATURE: [signature] Director 4/20/95 305-421-1257
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0116601 CP