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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P94000050938 (7) PALADIN MANAGEMENT RESOURCES, INC. Principal Place of Business Mailing Address 1451 W CYPRESS CREEK RD 1451 W CYPRESS CREEK RD SUITE 300 SUITE 300 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 3. Date Incorporated or Qualified 3a. Date of Last Report 07/11/1994 08/10/1995 Applied For 2. Principal Place of Business 2a. Mailing Address FET Number 65-0504409 26 21 Not Applicable Suite Apt #. etc Suite Apt #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032 Yes No 25 Florida Statutes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CARMAN, DEBORAH A 1451 W CYPRESS CREEK RD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 300 83 FT LAUDERDALE FL 33309 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 directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature by edici protestrolose of regimentagent and little if appealable (NOTE: Beg stere 1 Agent 5 greature required when relestating). OFFICERS AND DIRECTORS (36/8)12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 3.1300.6 CR2E034 NAME GOLBITZ, PHILIP 1.2 NAME STREET ADDRESS 1451 W CYPRESS CREEK RD SUITE 300 1.3 STREET ADDRESS CHY - \$* - ZIP FT LAUDERDALE FL 33309 1 4 CITY - ST - ZIP DELETE Change Addition TIFLE 2.1 1IFLE DV NAME 2.2 NAME GOLBITZ, NATALIE STREET ADDRESS 1451 W CYPRESS CREEK RD SUITE 300 2.3 STREET ADDRESS FT LAUDEROALE FL 33309 City-St-ZiP 2 4 City - St - Z/P Change Addition TITLE DELETE 3.1 TITLE NAME 3.2 NAM& STREET ADDRESS 3.3 STREET ADORESS CHTY-ST-ZIP 34 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TiTLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - ZIP DELFTE Change Addition TITLE 5.1 TIBLE NAME 5.2 NAME 5.3 STREE! ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition THLE 61 TITLE STREET ADDRESS

SIGNATURE: MALLILY GOLLOTE NATALIE GOLBITZ 7/23/96 574-9997

CITY - ST - ZIP

6.4 CHY - S1 - 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 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