FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P94000060927 (8)

1. Corporation Name
ANCHOR ENTERPRISES OF JENSEN BEACH, INC.

Principal Place of Business	Mailing Address
1012 N.E. ARCHORAGE LN. JENSEN BCH., FL 34957	2440 JEROME AVE. BRONX NY 10468

3. Date Incorporated or Qualified: 08/15/1994
3a. Date of Last Report: 02/24/1995
4. FEI Number: 65-0529388 ☐ 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

BODEM, LOREN E
815 COLORADO AVE.
SUITE 305
STUART FL 34994

10. Name and Address of New Registered Agent

81 Name
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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D NAME: LEE, JOSEPH STREET ADDRESS: ~~69-12 223RD ST.~~ CITY-ST-ZIP: ~~BAYSIDE NY 11364~~	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS: 3 LAKESIDE DR 1.4 CITY-ST-ZIP: VALHALLA, NY 10595	☒ Change ☐ Addition
TITLE: D NAME: KIM, CHAE O STREET ADDRESS: 21 HENRY ST. CITY-ST-ZIP: FORT LEE NJ 07024	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: D NAME: YANG, HOI K STREET ADDRESS: 41-64 54TH ST. CITY-ST-ZIP: WOODSIDE NY 11372	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: D NAME: LEE, JUNG C STREET ADDRESS: ~~154-16 17TH RD.~~ CITY-ST-ZIP: ~~WHITESTONE NY~~	☐ DELETE	4.1 TITLE 4.2 NAME: LEE, JUNG C 4.3 STREET ADDRESS: 15 E HARRIETT AVE 4.4 CITY-ST-ZIP: PALISADES, NJ 07650	☒ Change ☐ Addition
TITLE: D NAME: KIM, BYONG S STREET ADDRESS: 5582 CAND ST. CITY-ST-ZIP: BROOKLYN NY 11215	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: D NAME: ~~YUN, KANGY S~~ STREET ADDRESS: 2 FOXHURST ST. CITY-ST-ZIP: NEW HYDE PARK NY 11040	☐ DELETE	6.1 TITLE 6.2 NAME: YUN, KANG YOO 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☒ Change ☐ Addition

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. I 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X [signature] 2/20/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JOSEPH LEE

CR2E034 (12/95)