FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:50

DOCUMENT # P94000069029 (4)

1. Corporate Name
AU CASHMERE II, INC.

Principal Place of Business
STORE NUMBER 62
ROYAL PALM PLAZA
BOCA RATON FL 33432

Mailing Address
STORE NUMBER 62
ROYAL PALM PLAZA
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/19/1994
3a. Date of Last Report:

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

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

4. FEI Number: 65-0523014
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. 199.033, Florida Statutes: Yes / No

9. Name and Address of Current Registered Agent
KRAMER, SCOTT
1155 U.S. HIGHWAY ONE
SUITE 205
JUNO BEACH FL 33408

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 1.01 and 1.07 (1998), 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. Each change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

	D
NAME	POITOUT, GUY
STREET ADDRESS	101 OLYMPUS WAY
CITY	JUPITER FL 33477
	D
NAME	POITOUT, GENEVIEVE
STREET ADDRESS	101 OLYMPUS WAY
CITY	JUPITER FL 33477
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	
NAME	
STREET ADDRESS	
CITY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	Change / Addition
NAME	
STREET ADDRESS	
CITY	
	Change / Addition
NAME	
STREET ADDRESS	
CITY	
	Change / Addition
NAME	
STREET ADDRESS	
CITY	
	Change / Addition
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STREET ADDRESS	
CITY	
	Change / Addition
NAME	
STREET ADDRESS	
CITY	
	Change / Addition
NAME	
STREET ADDRESS	
CITY	

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 1.01(3), 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 the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or is attached with an address.

SIGNATURE: Poitout 4/25/95 (407) 847-0822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0437322 FP