

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 # P94000077964 (2)

1. Corporation Name

THE PRIVATE PLACEMENT GROUP, INC.

Principal Place of Business

9990 S.W. 77TH AVE., PH-5
MIAMI FL 33156

Mailing Address

9990 S.W. 77TH AVE., PH-5
MIAMI FL 33156



21	2. Principal Place of Business	2a	Mailing Address
22	Suite, Apt., #, etc.	26	Suite, Apt., #, etc.
23	City & State	27	City & State
24	Zip	28	Zip
25	Country	29	Country

3. Date Incorporated or Qualified	3a. Date of Last Report
10/21/1994	03/31/1995
4. FEI Number	Applied For
65-0533267	<input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

BURGER, ALAN M
9990 S.W. 77TH AVE., PH-5
MIAMI FL 33156

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	City
84	State
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

(Signature, typed or printed name of registered agent and agent's address)

(Name - Registered Agent signature required when re-registering)

1/31/96

FL 33130

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.1 NAME
NAME	STREET ADDRESS	1.2 NAME	1.2 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	1.3 STREET ADDRESS	1.3 CITY, ST, ZIP
CITY, ST, ZIP	TITLE	1.4 CITY, ST, ZIP	2.1 TITLE
TITLE	NAME	2.1 NAME	2.2 NAME
NAME	STREET ADDRESS	2.2 STREET ADDRESS	2.3 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	2.3 CITY, ST, ZIP	2.4 CITY, ST, ZIP
CITY, ST, ZIP	TITLE	2.4 TITLE	3.1 TITLE
TITLE	NAME	3.1 NAME	3.2 NAME
NAME	STREET ADDRESS	3.2 STREET ADDRESS	3.3 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	3.3 CITY, ST, ZIP	3.4 CITY, ST, ZIP
CITY, ST, ZIP	TITLE	3.4 TITLE	4.1 TITLE
TITLE	NAME	4.1 NAME	4.2 NAME
NAME	STREET ADDRESS	4.2 STREET ADDRESS	4.3 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	4.3 CITY, ST, ZIP	4.4 CITY, ST, ZIP
CITY, ST, ZIP	TITLE	4.4 TITLE	5.1 TITLE
TITLE	NAME	5.1 NAME	5.2 NAME
NAME	STREET ADDRESS	5.2 STREET ADDRESS	5.3 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	5.3 CITY, ST, ZIP	5.4 CITY, ST, ZIP
CITY, ST, ZIP	TITLE	5.4 TITLE	6.1 TITLE
TITLE	NAME	6.1 NAME	6.2 NAME
NAME	STREET ADDRESS	6.2 STREET ADDRESS	6.3 STREET ADDRESS
STREET ADDRESS	CITY, ST, ZIP	6.3 CITY, ST, ZIP	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. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Alan M. Burger

1/31/96

(305) 379-1790

CR2E034 (12/95)