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 P94000080681 (7) DOCUMENT # CBG INVESTMENTS, INC. Principal Place of Business Mailing Address 11021 SW 151ST PL 11021 SW 151ST PL MIAMI FL 33196 MIAMI FL 33196 3. Date Incorporated or Qualified 3a. Dale of Last Report 11/03/1994 05/01/1995 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 10371 SW 150 to PL. 65-0551259 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Watts, James A 11021 SW 151ST PL **MIAMI FL 33196** 83 84 11. Pursuant to the previsions 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. Thereby accept the appointment as registered agent. If am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed nan elof registered agent and title if applicable (NE)TE. Registered Agent signature required when result dirig 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TATLE MILLER, JAMES A JR NAME 1.2 NAME 7241 SW 119TH ST STREET ADDRESS 13 STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP 1.4 CITY - ST - ZIP TITLE DELETE 21 TITLE Add tion WATTS, JAMES A NAME 2.2 NAME 11021 SW 151ST PL STREET ADDRESS 2 3 STREET ADDRESS **MIAMI FL 33196** CITY-ST-ZIP 2 4 City ST-ZiP TILLE DELETE 3 1 THLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STHEFT ADDRESS CITY-ST-ZIF 4.4 City - ST - ZIP DELETE TITLE 51 TITLE | Change | Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 City - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS CITY - ST - 2IP 64 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 1 further certify that the informal on 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 arm an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutos, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

GNING OFFICER OR DIRECTOR

SIGNATURE: