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. Morthani ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P94000081262 (5) WALLPAPER DIRECT SUPERSTORES, INC. Principal Place of Business Mairing Address 350 SOUTH FEDERAL HWY 2929 E COMMERCIAL BLVD BARNETT BANK PH SUITE A BARNETT BANK PH SUITE A DEERFIELD BEACH FL 33441 FT LAUDERDALE FL 33308 3. Date Incorporated or Qualified 3a. Date of Last Report 11/04/1994 02/27/1995 Principal Place of Business 2a. Mailing Address # EEI Number Applied For 350 Journ HED GORAL HU OUTH FEDERAL HOLY 62-1584131 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032. BROWARD 29 Florida Statutes X Yes No

10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PARKER, STEVEN 350 SO. FEDERAL HIGHWAY 82 Street Add EDERAL BARNETT BANK TOWER PENTHOUSE SUITE A 83 **DEERFIELD BEACH FL 33441** DERFIELD 11. Pursuant to the provisions office or registered agent agent familiar with, a and 617 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered tops of Section 607.0505. Florida Statutes. DAIR DAIR SIGNATURE 4 (NORL Registered Agest signature required when remove ingr OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE DP 1 1 TIFLE Change NAME PARKER, STEPHEN 1.2 NAME CR2E034 350 SO FEDERAL HIGHWAY STREET ADDRESS 1.3 STREET ADDRESS CHTY-ST-ZIP DEERFIELD BEACH FL 1.4 CITY - ST - ZIP TITLE DELETE 2.1 THELE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST-2IF DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 C-TY - ST - 71P TITLE DELETE 4.1 TITLE ___ Change ____ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4 4 CITY - ST - ZIP DELETE TITLE 5.1 TiTLE Change [_] Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY ST-ZP TITLE DELETE € 1 FIFLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST ZP 14. If 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 innual 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 arrivan officer or directors the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block on an attachment with an address

Daybber France #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR