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 DIVISION OF CORPORATIONS 1996 DOCUMENT # P94000087882 (4) TRACHTENBERG ENTERPRISES INC. Mailing Address Principal Place of Business 14715 S.W. 91ST STREET 14715 S.W. 91ST STREET ARCHER FL 32618 ARCHER FL 32618 3a. Date of Last Report 3. Date Incorporated or Qualified 06/23/1995 12/05/1994 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 59-3285346 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199 032 Country Country Zip Yes 🗹 No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TRACHTENBERG, STEPHEN M 82 Street Address (P.O. Box Number is Not Acceptable) 14715 S.W. 91ST STREET ARCHER FL 32618 8.3 Zip Code 85 84 A. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered chichange was authorized by the corporation's board of directors. Thereby accept the appointment as registered ion 607,0505, Florida Statutes. 11. Pursuant to the provisions of office or registered agent agent. I am familiar with in the Sta**lb** en Track knowa Stephen SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3.6)13. AND DIRECTORS OFFICER! 12. Change Addition DELETE 1.111111 TITLE CR2E034 1.2 NAME TRACHTENBERG, STEPHEN M NAME 13 STREET ADDRESS 14715 SW 921ST ST STREET ADDRESS 14 CiTY - ST-ZIP ARCHER FL CITY - ST - ZIF Change Addition DELETE 2.1 THILE TITLE 2.2 NAME TRACHTENBERG, NATALIE E NAME 2.3 STREET ADDRESS 14715 SW 91ST ST STREET ADDRESS 2 4 CITY - \$1 - ZIP ARCHER FL CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 34 City-ST-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELFTE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily formished 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 office of 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 to mock 31 changed or on an attachment with an address.

5 4 CHTY - ST - ZIP

6.3 STHEET ADDRESS

64 CiTY - ST - ZIP

6 1 TITLE

6 2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

Stephen Trackle bug 8/6/96 352 495 95-79
SIGNATURE AND TYPED OR PRINTED JAMES OF SIGNING OFFICER OR DIJACTOR

DELETE

Change Addition