

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 # P95000000477 (6)

1. Corporation Name

C & S SOUTHERN ORNAMENTALS, INC.



Principal Place of Business: 1101 NO. CONGRESS AVENUE STE. 204 BOYNTON BEACH FL 33426
Mailing Address: 1101 NO. CONGRESS AVENUE STE. 204 BOYNTON BEACH FL 33426

3. Date Incorporated or Qualified: 01/03/1995
3a. Date of Last Report: [Blank]
4. FEI Number: 65-0550065
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. 199.032, Florida Statutes: [] Yes [X] No

2. Principal Place of Business: 21 1395 N.W. 17th Ave., Suite, Apt. #, etc: 22 114, City & State: 23 Delray Beach, FL, Zip: 24 33445, Country: 25 USA
2a. Mailing Address: 26 1395 N.W. 17th Ave., Suite, Apt. #, etc: 27 114, City & State: 28 Delray Beach, FL, Zip: 29 33445, Country: 30 USA

9. Name and Address of Current Registered Agent

WARDEN, STEPHEN J
1101 NO. CONGRESS AVENUE STE. 204
BOYNTON BEACH FL 33426

10. Name and Address of New Registered Agent

81 Name: [Blank]
82 Street Address (P.O. Box Number is Not Acceptable): 1395 N.W. 17th Ave.,
83 Suite 114
84 City: Delray Beach, FL 85 Zip Code: 33445

11. Pursuant to the provisions of Sections 607.0507 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 (if not applicable)

Signature typed or printed name of registered agent (if not applicable)

DATE

12. OFFICERS AND DIRECTORS
TITLE: PVTD, NAME: WARDEN, STEPHEN J, STREET ADDRESS: 1101 NO. CONGRESS AVENUE STE. 204, CITY-ST-ZIP: BOYNTON BEACH FL 33426
[] DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE: [Blank], 1.2 NAME: [Blank], 1.3 STREET ADDRESS: 1395 N.W. 17th Ave., Suite 114, 1.4 CITY-ST-ZIP: Delray Beach, FL 33445
[] Change [] Addition
2.1 TITLE: [Blank], 2.2 NAME: [Blank], 2.3 STREET ADDRESS: [Blank], 2.4 CITY-ST-ZIP: [Blank]
[] Change [] Addition
3.1 TITLE: [Blank], 3.2 NAME: [Blank], 3.3 STREET ADDRESS: [Blank], 3.4 CITY-ST-ZIP: [Blank]
[] Change [] Addition
4.1 TITLE: [Blank], 4.2 NAME: [Blank], 4.3 STREET ADDRESS: [Blank], 4.4 CITY-ST-ZIP: [Blank]
[] Change [] Addition
5.1 TITLE: [Blank], 5.2 NAME: [Blank], 5.3 STREET ADDRESS: [Blank], 5.4 CITY-ST-ZIP: [Blank]
[] Change [] Addition
6.1 TITLE: [Blank], 6.2 NAME: [Blank], 6.3 STREET ADDRESS: [Blank], 6.4 CITY-ST-ZIP: [Blank]
[] Change [] Addition

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***225.00

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)(A), 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]
SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

S/1/96 407-279-9200
6/17/96

CR2E034 (12/95)