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9. Name and Address of Current Registered Agent  10. Name and Address of Name Registered Agent  10. Name and Address of Name Registered Agent  20. SOUTH BISCAYNE BLVD. 4000 FIRST UNION FINANCIAL CENTER  MIAMI FL 33131-2398  11. Fürsuarit is the provisions of Sections 607 0502 and 607 1508, Fordas Statutes, the above-named conjourations submit its statement for the purpose of changing its registered difference with purpose of fordation in the Store of Florids. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I am furnish with purpose of changing its registered agent. I am furnish with purpose of changing its registered difference with purpose of fordation in the corporation's board of directors. Hereby accept the appointment as registered agent. I am furnish with purpose of changing its registered difference with purpose of changing its registered agent. I am furnish with purpose of changing its registered agent. I am furnish with purpose of changing its registered agent. I am furpose of changing its registered agent. I am furpose of changing	1	• * 1	t the contract of the contract	· ·	8. This corporation has liability for in	
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MIAMI FL 33131-2398  Ba			<b>:</b> B			,
11. Fursiant to the provisions of Sections 607 0502 and 607.1508, Florical Statutes, the above named corporation submits this statement for the purpose of changing its registered eigent. Or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby eccept the epipomment as registered agent. I am  SCRNATURE  SCRNATURE  DELICE STATE DELICE SAND DIRECTORS  13. ADDITIONS/GHANGES TO OFFICERS AND DIRECTORS IN 12  DELICE STATE  DURRIER, MARIA T  20 SOUTH BISCAYNE BLVD.  13 SIRRELADRESS  MIAMI FL 33131-2398  L4CITY-SL 7P  DILE 2 1 TIME  DELICE 3 TIME  22 RAME  23 SIRRELADRESS  GH- SL 7P  DILE 3 TIME  DELICE 3 TIME  DEL			:n			
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SECNATURE	<ol> <li>Pursuant to the or registered a</li> </ol>	e provisions of Sections 607.0502 Igent, or both, in the State of Florid	and 607.1508, Florida Statu la Such change was authori	tes, the above named corporated by the corporation's boa	ration submits this statement for the purp	ose of changing its registered office
Name		nd accept the obligations of, Section	on 607.0505, Florida Statute	s.	and the state of t	
D	Sign.					
CURRIER, MARIA T   12 NAME     200 SOUTH BISCAYNE BLYD.   13 STREEL ADDRESS	Tr				ADDITIONS/CHANGES TO OFFIC	
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	14. I do hereby cert	try that the information supplied w	th this filing is voluntarily for	6 4 CITY - ST - ZIP	or the exemption stated in Section 440.01	1/3/l/ Florido Stot des 15 des

14. I do hereby certly 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 outly, 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

Date Place

Date

X3/11/96 x305 577-2907