

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000006894 (6)

1. Corporation Name
SANBRA, INC.



600001869236
-06/20/96--01029--051
***225.00

Principal Place of Business: 1301 E ATLANTIC BLVD SUITE 1 POMPANO BEACH FL 33060
Mailing Address: 1301 E ATLANTIC BLVD SUITE 1 POMPANO BEACH FL 33060

3. Date Incorporated or Qualified: 01/23/1995
3a. Date of Last Report: N/A

2. Principal Place of Business: 21 9948 Woodwind Lane
22 Suite, Apt. #, etc.
23 City & State: Lake Worth, FL
24 Zip: 33467
25 Country: Palm Beach
26 Mailing Address: 2090 Palm Beach Lakes Blvd.
27 Suite, Apt. #, etc.: Suite 800
28 City & State: West Palm Beach, FL
29 Zip: 33409
30 Country: Palm Beach

4. FEI Number: 605-0603362 X
Applied For: Not Applicable
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 No

9. Name and Address of Current Registered Agent
SANTOS, JOYCE L
1301 E ATLANTIC BLVD
SUITE 1
POMPANO BEACH FL 33060

10. Name and Address of New Registered Agent
81 Name: Charles C. Chillingworth, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 2090 Palm Beach Lakes Boulevard
83 Suite 800
84 City: West Palm Beach FL 85 Zip Code: 33409

11. Pursuant to the provisions 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, 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, s. 607.0505, Florida Statutes.

SIGNATURE: *Charles C. Chillingworth* DATE: 6/10/96

12. OFFICERS AND DIRECTORS		DELETED
TITLE	D	<input checked="" type="checkbox"/>
NAME	SANTOS, JOYCE L	
STREET ADDRESS	8501 NW 52 CT	
CITY - ST - ZIP	LAUDERHILL FL 33351	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE	P, D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2 NAME	MANALAYSAY, JUDY		
1.3 STREET ADDRESS	9948 Woodwind Lane		
1.4 CITY - ST - ZIP	Lake Worth, FL 33467		
2.1 TITLE	VP, D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2 NAME	TREVINO, CEZAR		
2.3 STREET ADDRESS	9948 Woodwind Lane		
2.4 CITY - ST - ZIP	Lake Worth, FL 33467		
3.1 TITLE	EXEC. VP, D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3.2 NAME	COLLUM, JOHN		
3.3 STREET ADDRESS	9948 Woodwind Lane		
3.4 CITY - ST - ZIP	Lake Worth, FL 33467		
4.1 TITLE	T, D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4.2 NAME	RUBIN, MIKE		
4.3 STREET ADDRESS	1776 N Pine Island Road, Suite 314		
4.4 CITY - ST - ZIP	Plantation, FL 33322-5233		
5.1 TITLE	S, D	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.2 NAME	CHILLINGWORTH, CHARLES C.		
5.3 STREET ADDRESS	2090 Palm Beach Lakes Blvd., Suite 800		
5.4 CITY - ST - ZIP	West Palm Beach, FL 33409		
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
6.2 NAME			
6.3 STREET ADDRESS			
6.4 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. 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, upon an attachment with an address.

SIGNATURE: *Charles C. Chillingworth* DATE: 6/10/96 401/640-6000

CR2E034 (12/95)