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.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** P95000008980 (1) GILBERT, RICHARD, EIJO CORPORATION Principal Place of Business Mailing Address 7900 N.W. 36TH ST. 7930 N.W. 36TH ST. #G-24 #G-24 MIAMI FL 33166 MIAMI FL 33166 3. Date Incorporated or Qualified 3a. Date of Last Report 02/02/1995 2. Principal Place of Business. 2a. Mailing Address FEI Number Applied For 057568 21 26 65-Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has Lability for intangible tay under s. 199.032 24 25 29 Yes X No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **EIJO. MERCEDES** 4411 S.W.1 32ND AVE. Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33175 83 84 City 85 Zip Code 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, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I nereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, type discipled to an accept they select aspect and the of application INOTE: Registered Agest's quature required when remotitings 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/8)DELETE TITLE 1.1 TITLE Change Addition EIJO, MERCEDES NAME 1.2 NAME CR2E034 4411 S.W. 132ND AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33175** DITY-ST-ZIP 14 CITY - ST- ZIP TITLE DELETE 2: THE Change Addition NAM! 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - ST- ZIP TITLE DELETE 3.1 T:TLF Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY - ST - ZIP 3.4 CITY-ST-ZIP 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 DITLE DELETE 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 54 CHTY - ST-ZIP TITLE DELETE Change Addition 61 HILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CiTY - S1 - ZIP

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

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 1 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 trusted empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. 6/19/96

5438196