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

PROFIT CORPORATION ANNUAL REPORT

1996

SUITE A25 ORLANDO FL 32810



FLORIDA DEPARTMENT OF STATE

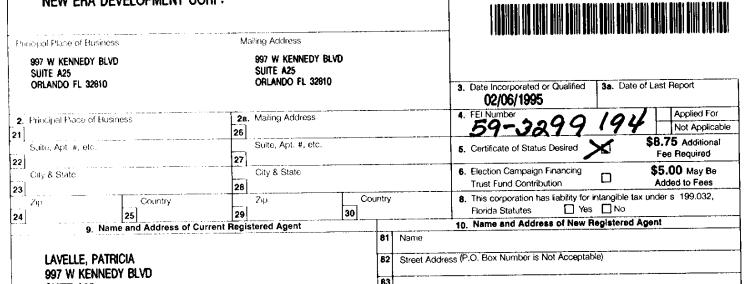
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000010554	(0)
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NEW ERA DEVELOPMENT CORP.



84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE .	grinton, type. I or printed manie of nigistered agent and title 1 a	ppinable (NO)	E: Registered Agent signature required s	when reinstating) DA	·	
12.	COLOR OF THE PARTY		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
THUE	D	DELETE	1 1 TITLE		Change	☐ Addition
NAME	LAVELLE, PATRICIA		1.2 NAME			
STREET ADDRESS	997 W KENNEDY BLVD A25		1.3 STREET ADDRESS			
CITY ST ZIP	ORLANDO FL 32810		1.4 CITY-ST-ZIP			
10sf		☐ DELETE	2 1 TITLE		Change	■ Addition
NAME			2 2 NAME			
SUBSELL ADDRESS			2 3 STREET ADORESS			
C-1Y+S1+ZP			2 4 CITY-ST-ZIP			
160		DELETE	3 1 TITLE		Change	☐ Addition
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Cilia - 81 - 7iP			3 4 CITY - ST - ZIP			F77 . 1.110
10.6		DELETE.	4 1 TITLE		☐ Change	☐ Addition
NAME			4.2 NAME			
STREET AGORESS			4.3 STREET ADDRESS			
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TI'LE		DELETE:	5 1 TITLE		☐ Change	Addition
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TILF		☐ DELETE	6)) [Change	☐ Addition
NAME			62 NAME			
STREET ADORESS			6.3 STREET ADDRESS			
	/		C 4 CHTY-ST- ZIP		() = () - E :	Ass I findbas
14. Loo hereb	y certify that the information supplied with this	s filing is voluntarily un	nished and does not qualify for	or the exemption stated in Section 119.07(3)	(K), Fiorida Statu e legal effect as	леs. i iurtner if made under

certify that the information indicate oath; that I am an officer or direct appears in Block 12 or Block 13 in another report is true and accurate and that my signature and distee empowered to execute this report as required by Cha an address.

SIGNATURE:

85

Zip Code