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.)

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

<u>'</u>	1996	·
DOCUI		#

P95000010994 (8)

STEPH	EN D. HUNT, P.A.	•)	
Principal Placi	e of Business	Mailing Address		n hamelanda ilen ilena i sini aliati alatiki alatiki alatiki alatiki alatiki alatiki alatiki alatiki alatiki a	#{B#0 #0 0# 0 0 0 0 0 0 1 #	
9600 S.W. 10 MIAMI FL 331		9600 S.W. 103RD AVE. MIAMI FL 33176				
				02/09/1995	Date of Last Report	
<u> </u>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt	# 010	Suite, Apt #. etc		59-330 4547	Not Applicable	
22		27 Solle, Apt. #. 8tc		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	ė	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zφ	Country	Zip	Country	This corporation has liab lity for intarigit		
24	25	29	30	Florida Statutes Yes	No	
	9. Name and Address of Curr	rent Registered Agent		10. Name and Address of New Registers	d Agent	
ни	INT, STEPHEN D		81 Name			
	00 S.W. 103RD AVE.		82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)		
	AMI FL 33176					
			B3			
			84 City		. 85 Zip Code	
				F	L	
office or re	egistered agent, or both, in the Sta	502 and 607.1508, Florida Statute: tle of Florida: Such change was au igations of, Section 607.0505, Flor	ithorized by the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
SIGNATURE	Security of the control of the contr					
12.	Signature types or prieted name of registere I OFFICERS A	AND DIRECTORS	Boy stered Agent's goaluie requir	······································		
TITLE	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition	
NAME	Hunt, Stephen D		1.2 NAME		orange reancase	
STREET ADORESS	9600 S.W. 103RD AVE.		13 STREET ADDRESS			
CITY+Sf+ZIP	MIAMI FL 33176		1 4 CiTY - ST - ZIP			
TITLE		DELETE	2 1 TITLE		Change Addition	
NAME			2 2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CHTY-ST-ZIP			2 4 CITY - ST - ZIP			
TITLE		DELETE	3 1 TITLE		Change Addition	
NAME			3 2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
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			
TITLE		DELETE	. 5 1 THLE		Change Addition	
NAME			5 2 NAME			
STREET ADORESS			5.3 STREET ADDRESS			
CITY: ST-ZIP		T posts	5 4 CI'Y - S1 - ZIP			
TIFLE		DELETE	6 1 TITLE		Change Addition	
NAME			6 2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY - ST - ZIP			64 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 logal 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 charged or on an attachment with an address.

SIGNATURE:

SIGNATURE:

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6/30/96 305-670-0083