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

1996



ELORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000020535 (7) WIN UNLIMITED INC Principal Place of Business Mailing Address 1903 SW 84 TERR 1903 SW 84 TERR N LAUDERDALE FL 33068 N LAUDERDALE FL 33068 3a. Date of Last Report 3. Date Incorporated or Qualified 03/13/1995 2a. Mailing Address Applied For 2. Principal Place of Business 26 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation has liability for intangible tax under s. 199.032 Yes 📉 No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KERR, WINSOME 1903 SW 84 TERR 82 Street Address (P.O. Box Number is Not Acceptable) N LAUDERDALE FL 33068 63 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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Fiorida Statutes. SIGNATURE Signature, type 1 or printed name of registered agent and title if applicable DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TUI, E TITLE KERR, WINSOME NAME 1.2 NAME 1903 SW 84 TERR STREET ADDRESS 1.3 STREET ADDRESS N LAUDERDALE FL 33068 1.4 CITY - ST - ZIP CITY - ST - ZIP DELETE 21 THLE Change Addition TITLE NAME 2.2 NAME 2.3 STREET ADORESS STREET ADDRESS CITY-ST-ZIP 2 4 CiTY - ST - ZIP DELETE Change ____ Addition 3 1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY ST ZIP CITY-ST-7IP Change Addition DELETE THILE 41 TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP DELE TE Change Addition 5.1.1111.6 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 City - ST - ZIP 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)(x). 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 in trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears in Block 13 or Block 13 if changed, or on an attachment with an address

6 1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 7IP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

MSW AND TYPED OR PRINTED NAME OF SIGNING OF

DELETE

6/7/96

Change Addition

(3/8)

CR2E034