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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000028868 (4) **DOCUMENT # GOLDSTAR TITLE CORPORATION** Mailing Address Principal Place of Business 2101 CORPORATE BLVD NW 2101 CORPORATE BLVD NW SUITE 204 SUITE 204 **BOCA RATON FL 33431-7343** BOCA RATON FL 33431-7343 3a. Date of Last Report 3. Date Incorporated or Qualified 04/07/1995 Applied For 4. FEI Number 2a, Mailing Address 2. Principal Place of Business 65-0576194 Not Applicable 26 21 \$8.75 Additional Suite, Apt #, etc Suite Apt #, etc Cert ficate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032 Country Country Zιp Zip Yes No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SCHWARTZ, HOWARD L Street Address (P.O. Box Number is Not Acceptable) 82 2101 CORPORATE BLVD NW SUITE 204 83 BOCA RATON FL 33431-7343 Zip Code 85 84 C tv itys, the above named corporation submits this statement for the purpose of changing its registered authorized by the corporation's board of directors. I hereby accept the appointment as registered 0502 and 607 1508, Florida S 11. Pursuant to the provisions of 5 office or registered agent, or agent. I am familiar with, and rida Statutes SIGNATURE special Agent's gnature required when repostering? ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8) 13. 12 ncitibbA Change DELETE 1.1 TITLE TITLE CR2E034 SCHWARTZ, HOWARD L 1.2 NAME NAME 2101 CORPORATE BLVD NW, SUITE 204 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431-7343** 1 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADERESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34 C-TY - ST - ZIP CITY - ST- ZIP Change Addition DELETE 41 TIRE TITLE 4 2 NAME NAME 4.3 STREET ADCRESS STREET ADDRESS 4.4 CITY - ST - ZiP CITY - ST - ZIP Change Addition DELETE 5.1 THLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - 7-P CITY - ST - ZIP Add tion Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 64 CHY-ST-ZIP ith this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes 1 is annual report or suppremental annual report is true and accurate and that my's gnature shall have the same logal effect as if of the corporation or the receiver of rustee empowered to execute this report or required by Chapter 617. Florida Statutes, and

an address

SIGNATURE:

14. I do hereby certify that the information sumplied further certify that the information indigited on it made under cath, that I am an office of director that my name appears in Block 12 (Block 13 if

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