SECONE AMOUNT DU	NOTICE: CORPORATION WILL E ON OR BEFORE 8/7/96: \$225 (IF DI	BE DISSOLVED ON OR AFTER SSOLVED, MINIMUM AMOUNT DU	AUGUST 7, 1996.		
, čo	PROFIT, RPORATION UAL REPORT 1996	FLORIDA DEPAF Sandra E Secreta	RTMENT OF STATE 3 Mortham ry of State CORPORATIONS	FILED	••
DOCU 1. Corporation	MENT # P950	00033040 (3)		96 SEP -9 PM 12:	19
	O PAGE, INC.	(0)		SECRETARY OF STA TALLAHASSEE, FLOR	ITE
					ON SAIRE HARR HING BONG BANG AND ARD IREA
	ce of Business	Mailing Address		I LODALOGE NA LOSAR DIVIDI DONTO RONTO B	###
1330 S DIXIE HWY HOLLYWOOD FL 33020 HOLLYWOOD FL 33020					
				3. Date Incorporated or Qualified 04/27/1995	3a. Date of Last Report
2. Principa F 21	Place of Business	2a. Mailing Address		4. FEI Number	Applied for
Suite, Apt	#, etc	Suite, Apt #, etc		65-05 77964 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & Stat	е	City & State		Election Campaign Financing	Fee Required
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	29	30	8. This corporation has liability for in Florida Statutes	Yes No
TI	9. Name and Address of Curr HE LAW FIRM OF LAWRENCE		81 Name	10. Name and Address of New Reg	istered Agent
343 ALMERIA AVE			82 Street Add	ress (P.O. Box Number is Not Acceptable	9)
CORAL GABLES FL 33134			83		
			. 84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607, 1508, Florida Statutes	the above-named corp	rporation submits this statement for the purpose of changing its registered	
office or registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I not be state of Florida Statutes, the above-named corporation's board of directurs. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE					
12.	Signature typed or protection and office justa each		Birgisteren Agent's griature reijler		17ATE
TITLE	Р	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12 Change Add tion
NAME STREET ADDRESS	ARGY, YENON 1330 S DIXIE HWY		1.2 NAME	6000	
CITY-S!-ZIP	HOLLYWOOD FL 33020		1.3 STREET ADDRESS 1.4 City - St. Zip	-09/26/9	U1957206
TITLE NAME	V. P.	DELETE	2 1 Totle	T-T-T-1 (Change Addition
STREET ADDRESS	1330 S. Dikle HM	,	2.2 NAME 2.3 STREET ADORESS		
CITY-ST-ZIP TITLE	Holly wood, FL 33	DELETE	2 4 GITY - \$1 - ZIP 3 1 TITLE		
NAME			32 NAME		Change Addition
STREET ADDRESS CITY-ST-ZIP			3 3 STREET ADDRESS		
TITLE		DELETE	3.4 CITY-SI-2IP 4.1 TITLE		Change Addition
NAME STREET ADDRESS			4 2 NAME 43 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
NAME		L DELETE	5 1 TITLE 5 2 NAME		Change Addition
STREET ADDRESS			5 3 STREET ADDRESS		
TITLE		DELETE	5.4 CITY - ST - 7IP 6.1 TITLE		Change Addition
NAME STREET ADDRESS		_	6 2 NAME	_	Change Addition
CITY - ST - ZIP			6.3 STREET ADDRESS 6.4 City - St - Zip	1229.	-18-910
14. I do hereby further cert	y certify that the information supplied for that the information indicated on	d with this filling is voluntarily furnithis annual report or supplement	shed and does not qualif	y for the exemption stated in Section 119	0.07(3)(k), Florida Statutes I
that my nar	er oath, that I am an officer or direct me appears in Block 12 or Block 13.	or of the corporation or the receive the changed, or on an attachment v	er or trustee empowered with an address	nd accurate and that my signature shall be to execute this report as required by One	are the same legal effect as if apter 617. Florida Statutes, and
SIGNATURE: SIGNATURE: SIGNATURE OF PRINTED HAVE OF SIGNING OFFICER OR DIRECTOR 8-3-96 (954) 923-2337					