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.) FLORIDA DEPARTMENT OF STATE PROFIT Sandra B. Mortham CORPORATION ANNUĂL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000044231 (5) **DOCUMENT #** M.A.C.U. ENTERPRISES, CORP. Mailing Address Principal Place of Business 7930 N.W. 36TH ST. 7930 N.W. 36TH ST. SHITE 216 SUITE 216 3a. Date of Last Report MIAM1 FL 33166 3. Date Incorporated or Qualified MIAMI FL 33166 06/07/1995 Applied For 4. FEI Number 2a. Mailing Address 65-0587013 Not Applicable Principal Place of Business 26 \$8.75 Additional 21 Suite Apt #, etc Certificate of Status Desired Fee Required Suite, Apt. #, etc 27 \$5.00 May Be 6. Election Campaign Financing 22 City & State Added to Fees City & State Trust Fund Contribution This corporation has liability for intangible tax under s. 199.032. 28 23 Country Yes No Country Florida Statutes Zip 30 10. Name and Address of New Registered Agent 29 24 9. Name and Address of Current Registered Agent 81 MASTANDREA, CARLOS Street Address (P.O. Box Number is Not Acceptable) 7930 N.W. 36TH ST. SUITE 216 83 MIAMI FL 33166 Zip Code 85 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, Florida Statutes. (MODE) to issue and Agond organizative required when restriction () ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 SIGNATURE Signature, by-educational concentration than the dample able (3/36)OFFICERS AND DIRECTORS 13. Change Addition 12. DELETE 1.1 TH LE CR2E034 TITLE DIRECTOR NAME CARLOS A. MASTANDREA 1.3 STREET ADDRESS STREET ADDRESS 7930 NW 36TH ST, #216 14 CITY - ST 71P Change Addition City - ST - ZIP MIAMI, FL. 33166 DELETE 2.1 BILE TIBLE 2.2 NAME NAME 2.3 STREET ACORESS STREET ADDRESS 2 4 CITY ST-ZIP Charge Addition CITY - ST - ZIP 3 1 TITLE DELFTE TITLE NAME 3.3 STREET ADORESS STREET ADDRESS 3.4 CHY-ST-ZIP Change Addition CITY - ST - ZIP DELETE 4 1 TILLE TITLE 4.2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4 4 CITY - S1 - ZIP Change Addition CITY - ST - ZIP DELFTE 5.1 THLE TITLE 5.2 NAM6 5.3 STREET ADORESS STREET ADDRESS 400001894424 -07/16/96--01066--031 5 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 6.1 TITLE THTLE 6.2 NAME. NAME 6.3 STREET ADDRESS \*\*\*225.00 STREET ADDRESS Trily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I premental annual report is true and accurate and that my signature shall have the same legal effect as if executer of trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and the property with an address. 14. I do hereby certify that the information supplied with this filting further certify that the information indicated on this annual remade under eath, that I am an officer or director of the corp. that my name appears in Block 12 or Block 13 if changed CITY-ST-ZIP

CARLOS A. MASTANDREA 6/31/91

DIRECTOR

SIGNATURE AND THEO OF BU

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