SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$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 **DOCUMENT #** P95000049193 (2) SARBEY REAL ESTATE, INC. Mailing Address Principal Place of Business 3380 COCONUT CREEK PARKWAY 3380 COCONUT CREEK PARKWAY COCONUT CREEK FL 33066 COCONUT CREEK FL 33066 3. Date incorporated or Qualified 3a. Date of Last Report 06/23/1995 Applied For 4. FEI Numbe 2a. Mailing Address 2. Principa! Place of Business 65-0620836 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 \$5,00 May Be City & State 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032 Country Zıp Country Zio Yes No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SARBEY, LILLIAN Street Address (P.O. Box Number is Not Acceptable) 82 3380 COCONUT CREEK PARKWAY **COCONUT CREEK FL 33066** 83 Zip Code 85 84 City 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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of. Section 607 0505. Florida Statutes. Colle SIGNATURE (f.(i)) Pojistered Agent signature required when remotishing) Signaring system or printed managed registered agent and title if applicable (3.6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition **PVST** DELETE 1.1 TITLE TITLE CR2E034 1.2 NAME SARBEY, LILLIAN NAME 3380 COCONUT CREEK PARKWAY 1.3 STREET ADDRESS #202 STREET ADDRESS **COCONUT CREEK FL 33066** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 21 TITLE TITLE 22 NAME SARBEY, ULLIAN NAME 3380 COCONUT CREEK PARKWAY 23 STREET ADDRESS STREET ADDRESS **COCONUT CREEK FL 33066** 2 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TIDLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETÉ 4.1 THLE THLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST ZIP DITY-ST-ZIP Change Addition DELETE 51 TIFLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZiP Change Addition DELETE 61 THLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CHY ST-ZIP 14. I do nereby 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 turther 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 or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 of Block 13 if changed, or of an attachment with an address.

SIGNATURE:

Man

7/11/96 954-974-2934