

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morton  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000049764 (0)

1. Corporation Name  
BASNIK, INC.



|                                            |                         |                                                                                            |                                                                     |
|--------------------------------------------|-------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Principal Place of Business                |                         | Mailing Address                                                                            |                                                                     |
| 111 SW 3 ST<br>6TH FLOOR<br>MIAMI FL 33130 |                         | 111 SW 3 ST<br>6TH FLOOR<br>MIAMI FL 33130                                                 |                                                                     |
| 2. Principal Place of Business             | 2a. Mailing Address     | 4. FEI Number                                                                              | 3a. Date of Last Report                                             |
| 21. State, Apt. #, etc.                    | 26. State, Apt. #, etc. | 65-0596293                                                                                 | 06/26/1995                                                          |
| 22. City & State                           | 27. City & State        | 5. Certificate of Status Desired                                                           | Applied For<br>Not Applicable                                       |
| 23. Zip                                    | 28. Zip                 | <input checked="" type="checkbox"/> \$8.75 Additional<br>Fee Required                      |                                                                     |
| 24. Country                                | 29. Country             | 6. Election Campaign Financing<br>Trust Fund Contribution                                  | <input type="checkbox"/> \$5.00 May Be<br>Added to Fees             |
| 25. Country                                | 30. Country             | 8. This corporation has liability for intangible tax under s. 199.032,<br>Florida Statutes | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

9. Name and Address of Current Registered Agent

HARRIS, ELLIOTT  
111 SW 3 ST  
6TH FLOOR  
MIAMI FL 33130

10. Name and Address of New Registered Agent

|                                                        |              |
|--------------------------------------------------------|--------------|
| 81. Name                                               | 85. Zip Code |
| 82. Street Address (P.O. Box Number is Not Acceptable) |              |
| 83. City                                               |              |
| 84. City                                               | FL           |

11. Pursuant to the provisions of Sections 607.0602 and 607.1505, 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.

SIGNATURE

(Signature of Registered Agent or Director)

(Signature of Registered Agent or Director)

(Date)

| 12. OFFICERS AND DIRECTORS |                  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                              |
|----------------------------|------------------|-------------------------------------------------------|------------------------------|
| TITLE                      | PD NICK, BASILIA | TITLE                                                 | SD RAQUEL TENNEN             |
| NAME                       | 11364 SW 73 TERR | NAME                                                  | 11364 S.W. 73 TERRACE        |
| STREET ADDRESS             | MIAMI FL         | STREET ADDRESS                                        | MIAMI, FLORIDA               |
| CITY, ST, ZIP              | VTD              | CITY, ST, ZIP                                         | AS ELLIOTT HARRIS            |
| TITLE                      | SAPOCZNICK, JOSE | TITLE                                                 | 111 S.W. 3RD STREET, 6TH FL. |
| NAME                       | 11364 SW 73 TERR | NAME                                                  | MIAMI, FLORIDA 33130         |
| STREET ADDRESS             | MIAMI FL         | STREET ADDRESS                                        |                              |
| CITY, ST, ZIP              |                  | CITY, ST, ZIP                                         |                              |
| TITLE                      |                  | TITLE                                                 |                              |
| NAME                       |                  | NAME                                                  |                              |
| STREET ADDRESS             |                  | STREET ADDRESS                                        |                              |
| CITY, ST, ZIP              |                  | CITY, ST, ZIP                                         |                              |
| TITLE                      |                  | TITLE                                                 |                              |
| NAME                       |                  | NAME                                                  |                              |
| STREET ADDRESS             |                  | STREET ADDRESS                                        |                              |
| CITY, ST, ZIP              |                  | CITY, ST, ZIP                                         |                              |
| TITLE                      |                  | TITLE                                                 |                              |
| NAME                       |                  | NAME                                                  |                              |
| STREET ADDRESS             |                  | STREET ADDRESS                                        |                              |
| 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)(k), 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. I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 or changed, or changed, with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ELLIOTT HARRIS

2/8/96

(305) 358-0116

CR2E034 (12/95)