FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE APPROVED **CORPORATION** Sandra B. Mortham AIID. ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS 1996 MAY -1 PH 2: 10 DOCUMENT # P95000050728 (1) 1. Corporation Name SECRETARY OF STATE WHITE EAGLE ENTERPRISES OF NEW JERSEY, INC. TÁLLÁHASSEE, FLORIDA Principal Place of Business Mailing Address 300001803453 -05/01/96_-01077--014 444 Brickell Avenue, Suite 300 1080 N. Delaware Avenue, Suite 506 Rivergate Plaza Philadelphia, PA 19125 ****200.00 ****200.00 Miami, FL 33131 3. Date Incorporated or Qualified | 3a. Date of Last Report 6/29/95 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 7685 Debeaubien Dr. 26 201 East Pine Street 22-3245242 Not Applicable Suite, Apt. W. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 1200 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Orlando, Florida 28 Orlando, Florida Trust Fund Contribution Added to Fees Country Country 8. This corporation has liability for intangible tax under s. 199.032. 24 32835 25 Orange 29 32801 30 Orange Yes □ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Marshall, Byrd F., Jr., Esq. Merkin, Stewart A. 444 Brickell Avenue, Suite 300 Street Address (P.O. Box Number is Not Acceptable)
Gray, Harris & Robinson, P.A. 82 Rivergate Plaza Miami, FL 33131 201 East Pine Street, Suite 1200 84 City Zip Code Orlando 32801 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 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 if am familiar with, and accept the obligations of Section 607 0505. Florida Statutes. Byrd F. Marshall, Jr., Esq. SIGNATURE Signature typed or p of registered agent and title if applicable INOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1. 1 TITLE D/P/T/S Stallone, Sylvester Change Addition NAME 1.2 NAME 7685 Debeaubien Drive STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP Orlando, FL 32835 1 4 CITY - ST- ZIP TITLE DELETE 2 1 71TLE Change Addition NAME Rosenberg, David 2.2 NAME STREET ADDRESS 7685 Debeaubiem Drive 23 STREET ADDRESS CITY - ST - ZIP Orlando, FL 32835 24 CITY - ST - ZIP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4 1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY - ST - ZIP 4.4 DITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6. 1 TITLE ___ Change Addition NAME 6.2 NAME STREET ADDRESS 6 3 STREET ADDRESS CITY - ST - ZIP 6.4 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 that my name appears in Block 13 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: David Rosenberg 4/30/96 (407)299-9450