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.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000062397	(1))
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OL BLUI	E KNIVES, INC.	0062397 (1)			
Principal Place	of Business	Mailing Address	·····		9 90/10 01019 F(090 11(12 1011/100) 1001
2825 SW 5TH BOYNTON BEA		2825 SW 5TH STREET BOYNTON BEACH FL 33	1435		
				3. Date Incorporated or Qualified	3a. Date of Last Report
				07/20/1995 4. FEI Number	Applied For
`	ace of Business	2a. Mailing Address		4. FET Number	Not Applicable
Suite, Apt. #	f alc	Suite, Apt. #, etc			\$8.75 Additional
2	, e.c	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Ζιp	Country	Zip	Country	8. This corporation has liability for it	ntang-ble tax under s. 199 032,
4	25	29	30	Florida Statutes	Yes X No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Reg	hararan waam
BUF	RNS, LYDIA F				
282	5 SW 5TH STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable	e)
80	YNTON BEACH FL 33435		83		
			84 City		FL 85 Zip Gode
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Statu	ites, the above-named corp	poration submits this statement for the purely accept	ruose of changing its registered
nHinn ne ec	solictored eagert or both in the State	i Al Flanda, Such change was i	aumorized by the cordorat	ion's board of directors. Thereby accept	the appointment as registered
nacet Lo	m tamiliar with land account the oblig	ations of Section 607 0505. Ft	lorida Statutes		
agent. I ar	m familiar with, and accept the oblig	ations of, Section 607.0505, Fi	lorida Statutes		
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runner certify that the information indicated on this almost report of supplemental annual report of a decouple and a country of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Blook 12 or Block 13 if changed or of an adaptment with an address

SIGNATURE: