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.) PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P95000077893 (2) ACQUISITION RESEARCH GROUP OF SOUTH FLORIDA, INC Principal Place of Business Mailing Address 3250 MARY STREET 3250 MARY STREET SUITE 307 SUITE 307 COCONUT GROVE FL 33133 COCONUT GROVE FL 33133 3. Date Incorporated or Qualified 3a. Date of Last Report 10/11/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 65-0625614 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation has liability for intangible tax under s. 199 032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **CORPORATION COMPANY OF MIAMI** 201 S. BISCAYNE BOULEVARD 82 1600 MIAMI CENTER 83 **MIAMI FL 33131** City Zip Code 85 Gables 33134 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DOUGIAS SANDENS 12. FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)TITLE DRSITIC DELETE 1.1 11717 Change Addition NAME BRIGHAM, EDWARD J. P. 1.2 NAME CR2E034 STREET ADDRESS 3250 MARY STREET, SUITE 307 1.3 STREET ADDRESS COCONUT GROVE FL 33133 CITY-ST-ZIP 14 CHY ST-ZIE TIFLE DELETE 2171118 Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - 7IP TITLE DELETE 3.1 TIFLE Change Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-2IP 3.4 CITY - ST-ZIP TITLE DELETE 4.1 THLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4 4 City - ST - ZiP TITLE DELETE 5.1 TITLE 300001917499° 🗆 Addition NAME 5.2 NAME -08/09/96--01021--031 STREET ADDRESS 5.3 STHEET ADDRESS ***225.00 CITY-ST-ZIP 5.4 C/1Y - ST- ZIP TITLE DELETE 6.1 TiTLE Change Add tron 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 fixing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x). Monda 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, 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 or Brock 13 if changed, or of an attachment with an address thought [306) J.P. Brigham John 1, 1996 (300) 4410404