

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  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P95000081456 (2)  
1. Corporation Name

EXCEL LASER, INC.



Principal Place of Business

Mailing Address

13068 TALL PINE CIRCLE  
FT. MYERS FL 33907

13068 TALL PINE CIRCLE  
FT. MYERS FL 33907

3. Date Incorporated or Qualified

10/19/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 26 6338 Presidential Ct #102

4. FET Number

X Applied For  
Not Applicable

Suite, Apt #, etc

Suite, Apt #, etc

22 City & State

27 102  
City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23 Zip

Country

28 Fort Myers, FL

Zip

Country

24 25 29 33919 30 USA

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes X Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORAN, ROBERT  
13068 TALL PINE CIRCLE  
FT. MYERS FL 33907

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (applicable)

(NOTE: Registered Agent signature required when re-appointing)

(DATE)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D MORAN, ROBERT  
NAME  
STREET ADDRESS 13068 TALL PINE CIRCLE  
CITY-ST-ZIP FT. MYERS FL 33907

DELETE

1.1 TITLE X Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

2.1 TITLE Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

3.1 TITLE Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

4.1 TITLE Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

5.1 TITLE Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE Change Addition

6.2 NAME  
6.3 STREET ADDRESS  
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 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 Block 13 if changed, or on an attachment with an address

SIGNATURE:

*Sandra B. Mortham*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-8-96

Signature

CR2E034 (3/96)