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.) FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P95000084495 (7) R. PROVENCIAL, INC. Principal Place of Business Mailing Address 2311 NE 48 STREET 2311 NE 48 STREET LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 33064 3. Date Incorporated or Qualified 3a. Date of Last Report <u>11/03/1995</u> 2. Principal Place of Business Mailing Address FEI Number 6245 56 Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zιρ Country This corporation has liability for intangible tax under s. 199 032 24 25 29 Yes 🔲 No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PROVENCIAL, RUSSELL **2311 NE 48 STREET** 82 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT FL 33064 83 84 City 85 Zip Code FL 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed rian e-of registered agent and title if applicable (NOTE: Registered Agent's greature required when reinstating): 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (3/96) TITLE DELETE PTD 117ID:E Change Addition NAME PROVENCIAL, RUSSELL 1.2 NAMI CR2E034 STREET ADDRESS 2311 NE 48 STREET 1 3 STREET ADDRESS LIGHTHOUSE POINT FL 33064 CITY-SI-ZIP 1.4 CITY - ST- ZIP TITLE **VSD** DELETE 21 TITLE Change Addition NAME PROVENCIAL, ALBERTA STREET ADDRESS 2311 NE 48 STREET 2.3 STREET ADDRESS CITY - ST - ZIP LIGHTHOUSE POINT FL 33064 2 4 C TY - ST - 7iP TITLE DELETE Change ___ Addition NAME 3 2 N STREET ADDRESS 3.3 SELADORESS. CITY-ST-ZIP 34 ST 202 TITLE DELETE Change [] Addition NAME STREET ADDRESS LADDRESS CITY-ST-ZIP \$1 - 7:0 TITLE DELETE Change Addition NAME STREET ADDRESS ELI ADDRESS CITY-ST-ZIP - S1 7/P TITLE DELETE 61 Change Addition NAME 6 2 STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 64 CITY - ST - ZIP 14. If do hereby certify that the information supplied with this filing is voluntarity furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes, if turther 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 attachmy 1) with an address.

6-10-96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: