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 #** P95000093236 (4) OLD SIAM INTERIORS, INC. Principal Place of Business Mailing Address 1000 NORTHEAST 86 STREET 1000 NORTHEAST 86 STREET MIAMI FL 33138 MIAMI FL 33138 3. Date Incorporated or Qualified 3a. Date of Last Report 12/07/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 65-0632050 Not Applicable Suite. Apt # etc Suite, Apt #, etc \$8.75 Additional 22 5. Certificate of Status Desired 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 Zio Country 8. This corporation has liability for intangible tax under s 199 032 Florida Statutes Yes You No 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33134 83 84 City 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 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, I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, typical or present has a of registered a just and the if applicable (hOTF, Regulated Agent signal iro required whos recistating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/8)ΡĎ TITLE DELETE 11 TIELE Change USAMANONT, NATHAVUT NAME 1.2 NAME CR2E034 1000 NORTHEAST 86 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33138** CITY - ST - ZIP 14 CITY - ST - ZIP TITLE DELETE 21 TITLE Change Addition THORPE, KENT E III NAME 2.2 NAME 1000 NORTHEAST 86 STREET STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33138 CITY - ST-ZIP 2 4 CITY - ST - ZIP STD DELETE THEF 3.1 TATLE Change Addition NICOLOSI, JOSEPH JACK NAME 3.2 NAME STREET ADDRESS 1000 NORTHEAST 86 STREET 3 3 STREET ADDRESS MIAMI FL 33138 CITY - ST - ZIP 3.4 CITY - ST- ZIP TITLE DELETE 4.1 TIGUE Change \_\_\_ Addition NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE 5.1 THILE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIE 54 CITY - ST-ZIP TITLE DELETE 6.1 DITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIF 6.4 CITY - S1 - 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 1 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 Black 12 or Black 13 if quanged or han attachment with an address.

JUNE 10, 1996 (308) 759-9002

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF

SIGNING OFFICER OR DIRECTOR