


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																									
DOCUMENT # P96000003112 (5) 1. Corporation Name ACTION COMMERCIAL ENTERPRISES, INC.																																																																																											
Principal Place of Business 17811 SOUTHWEST 176 STREET MIAMI FL 33187		Mailing Address 17811 SOUTHWEST 176 STREET MIAMI FL 33187-1807																																																																																									
2. Principal Place of Business 21 17811 S.W. 176 ST. Suite, Apt. #, etc. 22 City & State 23 MIAMI, FL. Zip Country 24 33187 USA		2a. Mailing Address 26 17811 S.W. 176 ST. Suite, Apt. #, etc. 27 City & State 28 MIAMI, FL. Zip Country 29 33187 USA																																																																																									
3. Date Incorporated or Qualified 01/10/1996		3a. Date of Last Report N/A																																																																																									
4. FEI Number N/A		Applied For <input checked="" type="checkbox"/> Not Applicable																																																																																									
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required																																																																																									
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																									
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																																																																											
9. Name and Address of Current Registered Agent THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134		10. Name and Address of New Registered Agent 81 Name KAREN L. GOLDBERG 82 Street Address (P.O. Box Number is Not Acceptable) 17811 S.W. 176 STREET 83 84 City MIAMI FL 85 Zip Code 33187																																																																																									
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 Karen L. Goldberg KAREN L. GOLDBERG, VSTD 4/21/97 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																											
12. OFFICERS AND DIRECTORS <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE</td> <td style="width: 70%;"> PD <input type="checkbox"/> DELETE </td> </tr> <tr> <td>NAME</td> <td>GOLDBERG, GENE G</td> </tr> <tr> <td>STREET ADDRESS</td> <td>17811 SOUTHWEST 176 STREET</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>MIAMI FL 33187</td> </tr> <tr> <td>TITLE</td> <td>VSTD <input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td>GOLDBERG, KAREN L</td> </tr> <tr> <td>STREET ADDRESS</td> <td>17811 SOUTHWEST 176 STREET</td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>MIAMI FL 33187</td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td><input type="checkbox"/> DELETE</td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> </tr> </table>		TITLE	PD <input type="checkbox"/> DELETE	NAME	GOLDBERG, GENE G	STREET ADDRESS	17811 SOUTHWEST 176 STREET	CITY - ST - ZIP	MIAMI FL 33187	TITLE	VSTD <input type="checkbox"/> DELETE	NAME	GOLDBERG, KAREN L	STREET ADDRESS	17811 SOUTHWEST 176 STREET	CITY - ST - ZIP	MIAMI FL 33187	TITLE	<input type="checkbox"/> DELETE	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> DELETE	NAME		STREET ADDRESS		CITY - ST - ZIP		TITLE	<input type="checkbox"/> DELETE	NAME		STREET ADDRESS		CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">1.1 TITLE</td> <td style="width: 70%;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr> <td>1.2 NAME</td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>1.4 CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>2.2 NAME</td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>2.4 CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>3.2 NAME</td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>3.4 CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>4.4 CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>5.4 CITY - ST - ZIP</td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> </tr> <tr> <td>6.4 CITY - ST - ZIP</td> <td></td> </tr> </table>		1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	1.2 NAME		1.3 STREET ADDRESS		1.4 CITY - ST - ZIP		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	2.2 NAME		2.3 STREET ADDRESS		2.4 CITY - ST - ZIP		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	3.2 NAME		3.3 STREET ADDRESS		3.4 CITY - ST - ZIP		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	4.2 NAME		4.3 STREET ADDRESS		4.4 CITY - ST - ZIP		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	5.2 NAME		5.3 STREET ADDRESS		5.4 CITY - ST - ZIP		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	6.2 NAME		6.3 STREET ADDRESS		6.4 CITY - ST - ZIP	
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address. SIGNATURE: Gene G. Goldberg GENE G. GOLDBERG 4/21/97 305-233-5397 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																											

CR2E034 (9/96)