LAWRENCE W. BORNS Attorney at Law

412 NORTH HALIFAX AVENUE, DAYTONA BEACH, FLORIDA 32118

P96000056148

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Maghreb Lodging, Inc.

Charter No. P96000056148 Date filed: July 2, 1996 300002218783--2 -06/20/97--01096--008 *****35.00 *****35.00

Enclosed please find original statement of change of registered office and registered agent for filing. Also enclosed is check in the amount of \$35.00 to cover the filing fee.

Thank you for your assistance in this matter and if anything further or additional is required please do not hesitate to contact this office.

Yours very truly,

Fairline Warnefine

Lawrence W. Borns

LWB/mm

Encl.

Charter No. <u>P96000056148</u>			_
Date Filed	July 2.	1996	

STATEMENT OF CHANGE OF REGISTERED OFFICE AND REGISTERED AGENT

Pursuant to the provisions of Sections 607.0501 and 607.0502, or 607.1508, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement for the purpose of changing its registered office and registered agent in the State of Florida. 1. The name of the corporation is: Maghreb Lodging, Inc. 2. The name and address of its present registered agent is: CORPORATION INFORMATION SERVICES, INC. 1201 Hays Street Tallahassee, Florida 32301 3. The name and street address to which its registered agent is to be changed is: (P.O. BOX NOT ACCEPTABLE) Julian Mazili, 2905 North 50th Street, Tampa, FL 33619 4. The street address of its registered office and the street address of the business office of its registered agent, as changed, are identical. 5. Such change was authorized by resolution duly adopted by its board of directors or by an officer of the corporation so authorized by the board of directors. \Signature_ (President or Vice President) Date April 5, 1997 HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FUR-THER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT UNDER SECTION 607.0505, FLORIDA STATUTES. Please Print/Type Name Julian Mazili XSignature __

FILING FEE \$35

Date___ April 5, 1997

7/90

Sandra B. Mortham Secretary of State

June 23, 1997

INTERACT SOFTWARE, INC. 4551 NW 49TH COURT COCONUT CREEK, FL 33073

SUBJECT: INTERACT SOFTWARE, INC.

Ref. Number: P96000056273

Debit Memo #: 74152-G

This is to inform you that check #1051 in the amount of \$165.00 submitted with the annual report for INTERACT SOFTWARE, INC. has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$180.00 made payable to the Department of State to cover the unpaid fees and service charge.

Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after August 23, 1997 and a reinstatement fee of an additional \$585 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (904) 487-6057.

Pat Bailey Accountant I

Letter Number: 397A00033220