

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
May 12 1997 8:00am
Secretary of State

DOCUMENT # P96000066915 (5)

1. Corporation Name
WARNAN CORP.

Principal Place of Business

2424 NORTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON FL 33431

Mailing Address

2424 NORTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON FL 33431-7746

3. Date Incorporated or Qualified
08/12/1996

3a. Date of Last Report

2. Principal Place of Business

21 22130 Belmar drive
Suite, Apt. #, etc

22 1103

23 Boca Raton FL
Zip Country

24 33433 25 Palm beach

2a. Mailing Address

26 22130 Belmar drive
Suite, Apt. #, etc

27 1103

28 Boca Raton FL
Zip Country

29 33433 30 Palm beach

4. FEI Number

650710316

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

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

Yes No

9. Name and Address of Current Registered Agent

FACTOR, WARREN MYLES
2424 NORTH FEDERAL HIGHWAY
SUITE 400
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name WARREN MYLES FACTOR

82 Street Address (P.O. Box Number is Not Acceptable)
22130 Belmar drive Apt 1103

83

84 City Boca Raton FL

85 Zip Code 33433

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P/T
NAME WARREN MYLES FACTOR
STREET ADDRESS 2424 N. Federal Highway suite 400
CITY-ST-ZIP Boca Raton, FL, 33431

TITLE V/S
NAME NANCY SUSAN FACTOR
STREET ADDRESS 2424 N. Federal Highway suite 400
CITY-ST-ZIP Boca Raton, FL, 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/T
1.2 NAME W.M. FACTOR
1.3 STREET ADDRESS 22130 Belmar drive 1103
1.4 CITY-ST-ZIP Boca Raton FL, 33433

2.1 TITLE V/S
2.2 NAME N.S. FACTOR
2.3 STREET ADDRESS 22130 Belmar drive 1103
2.4 CITY-ST-ZIP Boca Raton FL, 33433

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

MR. WARREN M. FACTOR

03-24-97 (954) 422-8966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)