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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

May 28 1997 8:00am

Secretary of State

4.29.97 (96)659-4722

1997

SIGNATURE

DOCUMENT # P96000103960 (6)

T.G. BROWN, P.A.

Principal Place of Business Mailing Address 324 DATURA STREET, SUITE 312 324 DATURA STREET, SUITE 312 WEST PALM BEACH FL 33401 West Palm Beach Fl 33401-5416 3. Date Incorporated or Qualified 3s. Date of Last Report 12/30/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite Apt # etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ai Name BROWN, T.G. ESQ. **324 DATURA STREET, SUITE 312** 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33401 83 84 City 65 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signul inclutyped or ponted have of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 President/ Directer DELETE 7111.6 1.1 TITLE Change T.G. Brown NAMÉ 12 NAME 324 Datura St #30 W. Palm Boach, FL 33 STREET ADDRESS 1.3 STREET ADDRESS CHY-ST-ZIP 1.4 CITY-ST-ZIP THUE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST ZIF 2. 4 City-ST-ZiP DELETE 31 TITLE Change Addition TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP DELETE Change 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-SI-ZP 4.4 CITY-ST-ZIP DELETE THE 5.1 TITLE ■ Addition AAMA 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-SI-ZIP 5.4 CITY-ST-ZIP DELETE DELE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

64 CITY-S1-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 B'ock 12 or Block 13 if charted, or on an attachment with an address.