FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 MAY -1 PM 5:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S33366 (3)

1. Corporation Name

EXCALIBUR MARKETING & ASSOCIATES INC.

Principal Place of Business
4500 N HIATUS RD
SUITE 219
SUNRISE FL 33351

Mailing Address
4500 N HIATUS RD
SUITE 219
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/21/1991
3a. Date of Last Report: 04/26/1994

2. Principal Place of Business
21 10571 NW 53rd ST.
22 Suite, Apt. #, etc.
23 City & State: SUNRISE, FL
24 Zip: 33351 25 Country: USA

2a. Mailing Address
26 10571 NW 53rd ST.
27 Suite, Apt. #, etc.
28 City & State: SUNRISE, FL
29 Zip: 33351 30 Country: USA

4. FEI Number: 65-0260558 — 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

STARUSTA, LEON J.
105 KETCH DR
SUNRISE FL 33326

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 617.0502, 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 s. 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

Title	D
Name	STARUSTA, LEON J.
Street Address	105 KETCH DR
City-St-Zip	SUNRISE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS [ ] Change [ ] Addition

14. I 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. 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: LEON STARUSTA — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/24/95 Daytime Phone: 305 742 8528

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