

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED

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(9)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BACK ON COURSE, INC.



Principal Place of Business

Mailing Address

P. O. BOX 380423
MIAMI FL 33238-0423
US

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MIAMI FL 33238-0423
US

3. Date Incorporated or Qualified

03/04/1991

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

TYLER, MARTIN
13030 N.W. 17TH COURT
MIAMI FL 33167

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 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 resigning)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	S	DELETE
NAME	DELEVEAUX, LORRAINE K.	
STREET ADDRESS	1241 NW 112TH TERR.	
CITY - ST - ZIP	MIAMI FL	
TITLE	V	DELETE
NAME	ALLS, MARY R.	
STREET ADDRESS	1825 N.W. 189TH TERR	
CITY - ST - ZIP	MIAMI FL	
TITLE	T	DELETE
NAME	TYLER, MARTIN	
STREET ADDRESS	13030 NW 17 COURT	
CITY - ST - ZIP	MIAMI FL	
TITLE	D	DELETE
NAME	CULMER, DONALD	
STREET ADDRESS	2235 N.W. 170TH TERR	
CITY - ST - ZIP	MIAMI FL	
TITLE	P	DELETE
NAME	DANIELS, SAM	
STREET ADDRESS	1729 N.W. 92ND ST.	
CITY - ST - ZIP	MIAMI FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Martin Tyler

MARTIN TYLER

08-28-96

(305) 754-0886

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/Mo/Yr

CR2E034 (3/96)