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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 55 SEP 15 RH 8: 17 1996 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name S39891 (4)STOP OTH CF STATE STOTAL SEE, FLORIDA PRESTIGE STORAGE & DISTRIBUTION, INC. Principal Place of Business Mailing Address 3400 MCINTOSH ROAD P.O. BOX 22430 FT. LAUDERDALE FL 33335 FT. LAUDERDALE FL 33335 3. Date Incorporated or Qualified 3a. Date of Last Report 03/22/1991 01/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0313688 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 \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Ζıp Country 8. This corporation has liability for intangible tax under s. 199 032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent BATALINI, JAMES Name 3400 MCINTOSH ROAD 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33335 83 City 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. Thereby 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 cume of registered agent and title if applicable (NOTE: Registered Agent signature required when recistating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE \_\_\_\_ Change \_\_\_\_ Addition **BATALINI. JAMES** NAME 1.2 NAME 800001949628 CR2E034 3400 MCINTOSH ROAD STREET ADDRESS 1 3 STREET ADDRESS -09/17/96--01151--003 FT. LAUDERDALE FL 33335 CITY - ST - ZIP \*\*\*\*238.75 1 4 CITY - ST - ZIP TITLE DELFTE 21 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHTY - ST - 2IP DELETE TITLE 3 1 THILE Change Addition 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZiP TITLE DELETE 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP TATLE DELETE 61 THLE NAME STREET ADDRESS 63 STREET ADDRESS CiTY-ST-7iP 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 periual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that Pamfur officer or director of rice 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 it rianged, or one attachment with an address

SIGNATURE

SIGNATURE

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Object Proof if