

**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. Morlham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S71951 (5)
1. Corporation Name
BLR MANUFACTURING CORP.

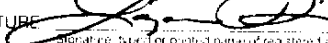


Principal Place of Business 13051 SW 133 CT. MIAMI FL 33186	Mailing Address 13051 SW 133 CT. MIAMI FL 33186
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2. Principal Place of Business 21 3330 S.W. 13 AVE	2a. Mailing Address 26 3330 S.W. 13 AVE	3. Date Incorporated or Qualified 08/08/1991	3a. Date of Last Report 03/10/1995
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 65-0286631	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State 23 FT. LAUDERDALE	City & State 28 FT. LAUDERDALE	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
Zip 24 33315	Country 25 U.S.A.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 29 33315	Country 30 U.S.A.	8. This corporation has liability for intangible tax under s. 199.03? Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent RIVERA, LAZARO 13051 SW 133 CT. MIAMI FL 33186	10. Name and Address of New Registered Agent 81 Name RIVERA, LAZARO 82 Street Address (P.O. Box Number is Not Acceptable) 3330 S.W. 13 AVE. 83 84 City FT. LAUDERDALE FL 85 Zip Code 33315
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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 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  **LAZARO RIVERA** DATE **6-24-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PDS	<input type="checkbox"/> DELETE	1.1 TITLE PRESIDENT, SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RIVERA, LAZARO		1.2 NAME LAZARO RIVERA	
STREET ADDRESS 13051 SW 133 CT		1.3 STREET ADDRESS 3330 S.W. 13 AVE	
CITY - ST - ZIP MIAMI FL 33186		1.4 CITY - ST - ZIP FT. LAUDERDALE, FL 33315	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE VICE PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME RUBEN ARRIETA	
STREET ADDRESS		2.3 STREET ADDRESS 3330 S.W. 13 AVE	
CITY - ST - ZIP		2.4 CITY - ST - ZIP FT. LAUDERDALE, FL 33315	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 included 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:  **LAZARO RIVERA** DATE **6-24-96** 954-522-6113

CR2E034 (3/96)