SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996 AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1996 **DOCUMENT #** (0)M & P HOLDING CORP. Principal Place of Business Mailing Address 1999 NW 70TH LANE 1999 NW 70TH LANE MARGATE FL 33063 MARGATE FL 33063 US 3a. Date of Last Report 3. Date Incorporated or Qualified 09/30/1991 08/23/1995 4. FEI Number Applied For Mailing Address Principal Place of Business 2. 1891 W. Sample ROAD 789 ( W. Jample KOAN Not Applicable 65-0292718 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Flection Campaign Financing Added to Fees 28 Trust Fund Contribution 23 This corporation has liability for intangible tax under s. 199.032. Yes No 29 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MONDELLI, JOSEPH V. 82 Street Address (P.O. Box Number is Not Acceptable) **4314 NW 70TH LANE CORAL SPRINGS FL 33065** 83 85 Zip Code 84 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. (NOTE: Birgistured Agest signature required when remetating) DATE Stgnature, typed or printed name of regulered agent and title if applicable (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE 1.1 TITLE TITLE E034 1.2 NAME MONDELLI, JOSEPH V. NAME 1.3 STREET ADDRESS 4314 NW 70TH LANE STREET ADDRESS **CORAL SPRINGS FL** 14 City - ST - ZiP CITY-ST-ZIP Ghange Addition DELETE 2.1 TiTLE TITLE 22 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 31 THLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4 City-St-ZIP CITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 51 TITLE TITLE NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS 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 1 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 CITY-ST-ZIP Soseph V. Monnell, PROS. 6-2096 954-344-8900

SIGNATURE: