FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT

Apr 03 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1997 DIVISION OF CORPORATIONS DOCUMENT # (2)S85997 H.R. MURRAY, INC. Principal Place of Business Mailing Address 181 N.W. 20TH STREET 181 N.W. 20TH STREET **BOCA RATON FL 33431-7846** BOCA RATON FL 33431-7946 3. Date Incorporated or Qualified 3a. Date of Last Report 10/08/1991 04/09/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3089845 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Ζiρ Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MURRAY, HARRY R. 6781 VILLAS DR. EAST Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33433** 83 84 City Zip Code 85 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 reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) DELETE TOLE 1.1 THE MURRAY, HARRY R NAME 12 NAME CP2E034 STREET ADDRESS 6781 VILLAS DR., EAST 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CHTY - ST - ZIP DELETE TITLE Change Addition 2.1 TITLE MURRAY, ETHEL F NAME 2.2 NAME 6781 VILLAS DR., EAST STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-\$1-ZIP DELETE Change Addition TITLE 3.1 TITLE MURRAY, RICHARD T NAME 3.2 NAME **575 NW 13TH AVE** STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 3.4. CITY - \$1 - 2IP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-S1-ZIP DELETE __ Change Addition TITLE 5.1 THEF NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELE16 Addition Change TITLE 6.1 TITLE NAME 6.2 NAME **STREET ADDRESS** 6.3 STREET ADDRESS 6.4 CITY - S1 - ZIP DITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental any ust report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or director 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.

FILED