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.) FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (5)**DOCUMENT #** S87626 **BUCKNAM & BUCKNAM, INC.** Mailing Address Principal Place of Business 819 S.E. TENTH AVENUE **B19 S.E. TENTH AVENUE** DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 3a. Date of Last Report 3. Date incorporated or Qualified 08/10/1995 10/15/1991 Applied For FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0292220 26 21 \$8.75 Additional Suite, Apt. #, etc. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 This corporation has liability for intangible tax under s 199 032

Florida Statutes Yes X No 23 Country Country Zιο Florida Stalutes 30 29 10. Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent 81 BUCKNAM, WILLIAM E. Street Address (P.O. Box Number is Not Acceptable) 819 S.E. TENTH AVENUE **DEERFIELD BEACH FL 33441** 83 65 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. (NOTE: By gistered Agont signature required when reinstating) SIGNATURE Signature, typed or printed non-electringistered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change Addition 12. DELETE 1.1 1:11.6 D CR2E034 TITLE 1.2 NAME BUCKNAM, WILLIAM E. NAME 1.3 STREET ADDRESS 819 S.E. TENTH AVE STREET ADDRESS DEERFIELD BEACH FL 1.4 CiTY - ST - ZIP Change Addition CITY - ST - ZIP DELETE TITLE 2.2 NAME BUCKNAM, MARIA CARLA NAME 2.3 STREET ADDRESS 819 S.E. TENTH AVE STREET ADDRESS 2 4 CITY - ST-ZIP DEERFIELD BEACH FL Change Addition CITY-S1-ZIP DELETE 31 TITLE TITLE NAME 3 3 STREET ADDRESS STREET ADDRESS 34 CITY-ST-ZIP Change Addition CITY-ST-ZIP 4 1 TITLE DELETE TITLE 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP Change Addition CITY-ST-ZIP DELETE 61 THLE TITLE NAME 6 3 STREET ADDRESS STREET ADDRESS 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 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, a that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address 6 4 CITY - ST - ZIP ame legal effect as if

SIGNATURE:

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