FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

9:10

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # V03332 (6)

1. THULIN-CEDERHOLM, INC.

900 S. PASADENA AVE.
S PASADENA FL 33707

900 S. PASADENA AVE.
S PASADENA FL 33707

3. Date Incorporated/Qualified: 12/31/1991

3a. Date of Last Report: 05/01/1994

4. FEI Number: 59-3098584 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. Does corporation has stated, or changed to under S. 607.0505 Florida Statutes: Yes / No

9. Name and Address of Current Registered Agent

POWELL, THOMAS
7002 GREVILLA AVE. S.
S. PASADENA FL 33707

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 Florida Statutes, the above named corporation adopts the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. The character of business of the corporation is as stated above. Under penalties of perjury, I declare that I have read the foregoing and the facts stated therein are true.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	THULIN, MATS
STREET ADDRESS	900 SOUTH PASADENA AVE
CITY, STATE, ZIP	S PAS FL
TITLE	VD
NAME	CEDERHOLM, HANS
STREET ADDRESS	900 SOUTH PASADENA AVE
CITY, STATE, ZIP	S PASADENA FL
TITLE	ST
NAME	CEDERHOLM, HANS
STREET ADDRESS	900 SOUTH PASADENA AVE
CITY, STATE, ZIP	S PASADENA FL

13. ADDITIONS OR CHANGES TO OFFICERS AND/OR DIRECTORS

Change / Addition

14. I hereby certify that the information supplied with this report is complete, accurate and in compliance with Section 607.0505 of Florida Statutes. I further certify that the corporation has paid to the State of Florida all franchise taxes and fees due and payable, and has filed all reports required by Chapter 607 Florida Statutes and that its name appears above or on an attached amendment, or no such amendment is required.

SIGNATURE: Mats Thulin

SIGNATURE AND TYPED OR PRINTED NAME OF REPORTING OFFICER OR DIRECTOR

5-1-95 813 747-4445

0307066 CP