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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT # (3)ADVANCED SYSTEMS STEAM CO., INC. Mailing Address Principal Place of Business 6762 HARBOUR BLVD. 6762 HARBOUR BLVD. PANAMA CITY BEACH FL 32407 PANAMA CITY BEACH FL 32407 3a. Date of Last Report 3. Date Incorporated or Qualified 05/01/1995 02/11/1992 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-3104766 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032, Country Country Zip Zio Yes No 30 Florida Statutes 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WIEDENMANN, DAVID P. Stroet Asidress (RO Box Number is Not Acceptable) 82 6519 HARBOUR BLVD. PANAMA CITY BEACH FL 32407 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE. INOTE: Registered Agent signature reduced when reinstating) Signature, Noted or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (36/8)OFFICERS AND DIRECTORS 13. 12. Addition DELETE 1.1 TITLE TITLE CR2E034 12 NAME NAME WIEDENMANN, DAVID P 1.3 STREET ADDRESS 6762 HARBOUR BLVD. STREET ADDRESS 1.4 CITY - \$1 - 2IP PANAMA CITY BEACH FL CITY-ST-ZIP X Change Addition DELETE 2.1 THLE TITLE ST Hurley, Janice M

2 2 NAME HURLEY, JANICE M NAME 6762 Harbour Blvd. 2.3 STREET ADDRESS 6762 HARBOUR BLVD. STREET ADDRESS Panama City, FL 32407 2 4 CITY - ST-ZIP PANAMA CITY FL CITY-ST-ZIP Change DELE 1E 3 1 TITLE V/S/T Denise Wie**d**ermann 3.2 NAME 6762 Harbour Blvd. 3 3 STREET ADDRESS Panama City, FL 32407 3.4 CITY-SE-ZIP CITY - ST - ZIP Change Addition DELETE 4.1 THILE TITLE 4 2 NAME NAME 4.3 STREET ADORESS STREET ADDRESS 4 4 CITY - ST - Z-P CITY - ST - ZIP Change Addition DELETE 5 1 THLE Tifi F 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 61 1111.6 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 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 turther 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/05/96 904) 230 - 931/