

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MAXIMUM AMOUNT DUE TO REINSTATE: \$375)

CORPORATION
 ANNUAL REPORT

1994 1995



FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED
 AND
 FILED

DOCUMENT # V16323

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95 MAY -1 PM 5:44

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

1. CORPORATION NAME
 PYRAMD PROPERTIES, INC.

2. Mailing Address
 1825 S. RIVERVIEW DRIVE
 MELBOURNE FL 32901

Principal Office Address
 1825 S. RIVERVIEW DRIVE
 MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation or Qualification 02/20/1992
 3a. Date of Last Report 05/01/1993

2. Mailing Address
 21 c/o John R. Kancilia
 State Apt # etc
 22 516 N. Harbor City Blvd
 City & State
 23 Melbourne, FL 32935

2a. Principal Office Address
 26 c/o John R. Kancilia
 State Apt # etc
 27 516 N. Harbor City Blvd
 City & State
 28 Melbourne, FL 32935

24 25 29 30

4. FEI Number 59-3133466
 5. Certificate of Status Desired
 \$8.75 Additional Fee Required
 Nonprofit with IRS 501(c)(3)
 Tax Exempt Status
 6. Election Campaign
 Exemption Trust
 Fund Contribution
 \$5.00 May Be
 Added to Fees
 7. This corporation has adopted the Uniform Gifts to Minors Act (UGMA) or the Uniform Transfers to Minors Act (UTMA)
 Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 MITCHEL, BRUCE A. ESQUIRE
 1825 S. RIVERVIEW DRIVE
 MELBOURNE FL 32901

10. Name and Address of New Registered Agent
 81 Name John R. Kancilia
 82 Street Address (P.O. Box Number is Not Acceptable) 516 N. Harbor City Blvd.
 83
 84 City Melbourne FL 85 Zip Code 32935

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement to 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 to take effect, except the appointment of registered agent, and hereby with and accept the obligations of Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE 4/26/95 4/26/95

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. NAME D THOMAS, BRUCE J., II 150 FIFTH AVENUE INDIALANTIC FL		1. NAME	
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14. I, the undersigned, certify that the information supplied with this filing is completely furnished and correct and equally for the exemption stated in Section 607.0502, Florida Statutes. I further certify that the information included on this return represents the supplemental annual report as 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 this corporation, or the receiver or trustee empowered to make this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: [Signature] 4/26/95
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR