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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18214

(9)

1. Corporation Name

CELLAR DOOR SOUTH EAST, INC.

Principal Place of Business

900 NE 26 AVE
FT LAUDERDALE FL 33304
US

Mailing Address

900 NE 26 AVE
FT LAUDERDALE FL 33304
US

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

25

30

9. Name and Address of Current Registered Agent

WASSON, A.D.
900 NE 26 AVE
FT LAUDERDALE FL 33304

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 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]

To be Registered Agent signature required

(A)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

P
MANKIN, TED
900 NE 26 AVE
FT LAUDERDALE FL

DELETE

V
HOWARD, WILSON
900 NE 26 AVE
SUNRISE FL

DELETE

V
FRANKS, RICHARD
900 NE 26 AVE
SUNRISE FL

DELETE

ST
WASSON, A.J.
900 NE 26 AVE
SUNRISE FL

DELETE

AS
ITSELL, JOHN
900 NE 26 AVE
SUNRISE FL

DELETE

TITLE NAME STREET ADDRESS CITY-STATE-ZIP

DELETE

1. TITLE NAME STREET ADDRESS CITY-STATE-ZIP

12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP

Change Addition

2. TITLE NAME
23 STREET ADDRESS
24 CITY-STATE-ZIP

Change Addition

3. TITLE NAME
33 STREET ADDRESS
34 CITY-STATE-ZIP

Change Addition

4. TITLE NAME
43 STREET ADDRESS
44 CITY-STATE-ZIP

Change Addition

5. TITLE NAME
53 STREET ADDRESS
54 CITY-STATE-ZIP

Change Addition

6. TITLE NAME
63 STREET ADDRESS
64 CITY-STATE-ZIP

Change Addition

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. I 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 if made under oath, that I am an officer or director of the corporation, or a receiver or trustee empowered 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 additional page with an address.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/96

(1)

(1), (2), (3), (4), (5), (6), (7), (8), (9), (10), (11), (12), (13), (14), (15), (16), (17), (18), (19), (20), (21), (22), (23), (24), (25), (26), (27), (28), (29), (30), (31), (32), (33), (34), (35), (36), (37), (38), (39), (40), (41), (42), (43), (44), (45), (46), (47), (48), (49), (50), (51), (52), (53), (54), (55), (56), (57), (58), (59), (60), (61), (62), (63), (64), (65), (66), (67), (68), (69), (70), (71), (72), (73), (74), (75), (76), (77), (78), (79), (80), (81), (82), (83), (84), (85), (86), (87), (88), (89), (90), (91), (92), (93), (94), (95), (96), (97), (98), (99), (100)

CR2E034 (12/95)