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FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # V27275 (9) 1. Corporation Name SOUTH FEDERAL CAPITAL CORP.



Principal Place of Business 2050 EAST OAKLAND PARK BLVD. SUITE 209 FORT LAUDERDALE FL 33306 Mailing Address 2050 EAST OAKLAND PARK BLVD. SUITE 209 FORT LAUDERDALE FL 33306

3. Date Incorporated or Qualified 04/06/1992 3a. Date of Last Report 05/01/1995 4. FEI Number 65-0334090 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. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent RICHMOND, HEATHER 2050 EAST OAKLAND PARK BLVD. SUITE 209 FORT LAUDERDALE FL 33306 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 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE:

Table with 2 main columns: OFFICERS AND DIRECTORS (12) and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1? (13). Rows include Name, Title, Street Address, City-ST-ZIP for multiple individuals.

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 the 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 attachment with an address.

SIGNATURE: Heather Richmond, Pres. 4/29/96 954/561-0700 HEATHER RICHMOND, PRESIDENT Date Daytime Phone #

CR2E034 (12/95)