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 CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # V28501

1. Corporation Name
FENCOVE FLORIDA INC.

Principal Place of Business | Mailing Address

3. Date Incorporated or Qual'd Fee: APRIL 10, 1992
3a. Date of Last Report: MARCH 1995

2. Principal Place of Business
21 238 SW 1ST STREET
Suite, Apt. #, etc.
22 UNIT F7
City & State
23 POMPANO BEACH FLORIDA
Zip 24 33060
Country 25 U.S.A.

2a. Mailing Address
26 P.O. BOX 970
Suite, Apt. #, etc.
27 6 COVE ROAD
City & State
28 FENELON FALLS ONTARIO
Zip 29 K0M 1N0
Country 30 CANADA

4. FEI Number: 65-0335842
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. This corporation has lately by formal agreement [illegible] Florida Statutes [✓] Yes [ ] No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent
81 Name: RICHARD EDWARDS
82 Street Address (P.O. Box Numbers Not Acceptable): 238 SW 1ST STREET
83 UNIT F7
84 City: POMPANO BEACH FL 85 Zip Code: 33060

11. Pursuant to the provisions of Section 607.0505(2), 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. The street address of the registered office and the name of the registered agent of this corporation shall be as shown below. Having been designated by the corporation's board of directors, I hereby accept the appointment as registered agent. I am familiar with and hereby agree to comply with the provisions of all statutes relating to the proper performance of my duties.

SIGNATURE: Richard L. Edwards RICHARD L. EDWARDS JULY 22, 1996

12. OFFICERS AND DIRECTORS

TITLE	PRESIDENT - DIRECTOR
NAME	RICHARD EDWARDS
STREET ADDRESS	238 SW 1ST STREET
CITY, STATE, ZIP	POMPANO BEACH FLORIDA 33060
TITLE	DIRECTOR
NAME	EDITH EDWARDS
STREET ADDRESS	238 SW 1ST STREET
CITY, STATE, ZIP	POMPANO BEACH FLORIDA 33060

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

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-07/26/96--~~00000-000~~
***233.75 -01042-001

7-26-96
JOR

14. [illegible]

SIGNATURE: Richard L. Edwards RICHARD L. EDWARDS JULY 22, 1996 705-432-2314
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)