SECOND	NOTICE: CORPORATION WILL BE	E DISSOLVED ON OR AFTER	R AUGUST 7, 1996.		
	ON OR BEFORE 8/7/96: \$225 (IF DISS PROFIT	(S.	UE TO REINSTATE: \$375.) REMENT OF STATE		
	RPORATION Sandra B Mortham				
	IAL REPORT	• <b></b>	ary of State		
	1996	DIVISION OF	CORPORATIONS		
DOCUN 1. Corporation	MENT # <b>V3019</b>	0 (5)			
EARL O	UEEN FRAMING INC.			I HADIN ON DER DANN OOMER MAIN	DIN DEN BANK BIDIK BIDIK BIDIK DIRIK BIRK MER
Principal Place	of Business	Mailing Address	***************************************		
142 DRAKE ROAD 142 DRAKE ROAD ST. AUGUSTINE FL 32086 US IIS			86		
w		U\$		3. Date Incorporated or Quali 04/17/1992	fied <b>3a.</b> Date of Last Report <b>08/09/1995</b>
<u> </u>	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt i	26			59-3125062	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desire	Fee Required
City & State	1	City & State		6. Election Campaign Financi Trust Fund Contribution	ng \$5.00 May Be  Added to Fees
Zip	Country	Zip	Country	8. This corporation has liabilit	y for intang ble tax under s. 199 032,
24	25 9. Name and Address of Currer	29   nt Registered Agent	30	Florida Statutes  10. Name and Address of Ne	Yes 1/ No w Registered Agent
QU	EEN, EARL		81 Name	William Control	
142 DRAKE ROAD			82 Street Add	ress (P.O. Box Number is Not Acce	eptable)
SI.	AUGUSTINE FL 32086		83	WAY WELL THE	
			84 City		<b>85</b> Zip Code
11. Pursuant t	a the provisions of Sections 607 050	02 and 607 1508, Florida Statu	tes, the above named corp	poration submits this statement for t	the purpose of changing its registered scept the appointment as registered
office or re agent. I ar	egistered agent, or hoth, in the State in familiar with land accept the oblig	of Florida, Such change was a ations of, Section 607.0505, FI	authorized by the corporat onda Statutes	ion's board of directors. I hereby ac	coept the appointment as registered
SIGNATURE	EARL G. Que	een (president	11 H. interest Artery Signature record	Q Que	8/3/96
12.	*********	ID DIRECTORS	13.	ADDITIONS/CHANGES TO C	DEFICERS AND DIRECTORS IN 12
TITLE NAME	d Queen, earl	[_] DECETE	1 1 TITLE 1 2 NAME		Change Addition
STREET ADDRESS	220 MICKLER ROAD		1 3 STREET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL	T-1	1.4 CITY+ST+ZIP		
TITLE NAME	d Queen, vickie	DELETE	2 1 Title 2 2 NAME		Change Addition
STREET ADDRESS	220 MICKLER ROAD		2 3 STREET ADDRESS		
CITY-ST-ZIP	ST. AUGUSTINE FL		2 4 CITY - ST - 7IF		
TITLE		DELETE	3 1 TAFLE		Change Add-tion
NAME STREET ADDRESS			3 2 NAME 3 3 STREET ADDRESS		
CITY-ST-ZIP			3.4 City St-ZIP		
TITLE		DELE TE	4.1 TOLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS CITY-ST-ZIP			4.3 STREET ACCRESS 4.4 CITY ST. ZIP		
TITLE		DELETE	5 1 TIFLE		Change Addition
name			5 2 NAMŁ		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5 4 CITY - S1 - ZIP 6 1 TIDLE		Change Addition
NAME			6 2 NAME		Cande Calvadian
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP	y certify that the information supplie	d with this films is valenter to 6	6 4 CITY - ST - ZIP	life for the everyotion stated as Con-	hoo 110 07(2)(k) Florido Cestado I
further cer made und	lify that the information indicated on	ithis annual report or supplem or of the corporation or the rec	ental annual report is true : eiver or trustee empowere	and accurate and that my signature	e shall have the same legal effect as if the Chapter 617, Florida Statules, and

SIGNATURE:

SIGNATURE AND TYPED OR BUSINESS NAME OF SIGNING OFFICER OR DISECTOR

8/3/96 (904)194-1350