

**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. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**FILED**

96 SEP 16 AM 9:02

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA



**DOCUMENT # V42598 (5)**  
 1. Corporation Name  
**BOCA GROUP, INC.**

Principal Place of Business Mailing Address  
**5106 OAK HILL LANE #922 DELRAY BEACH FL 33445**

3. Date Incorporated or Qualified: **06/10/1992**  
 3a. Date of Last Report: **04/20/1995**  
 4. FEI Number: **22-3192853**  
 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

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip 28 Zip 29 Country 30 Country

9. Name and Address of Current Registered Agent  
**CAPITAL CONNECTION, INC.**  
**417 E VIRGINIA ST**  
**SUITE 1**  
**TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent  
 81 Name: **GEORGE MORICOLI**  
 82 Street Address (P.O. Box Number is Not Acceptable): **5106 OAK HILL LN #922**  
 83 City: **DELRAY BEACH** FL 85 Zip Code: **33484**

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 607.0502, Florida Statutes.

SIGNATURE: *George V. Moricoli* *Res.* **9/16/96**

12. OFFICERS AND DIRECTORS  
 TITLE: **D**  DELETE  
 NAME: **MORICOLI, GEORGE**  
 STREET ADDRESS: **5106 OAK HILL LN #922**  
 CITY-ST-ZIP: **DELRAY BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 Change  Addition  
**100001959591**  
**-09/30/96--01029--016**  
**\*\*\*\*225.00 \*\*\*\*225.00**

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, but I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 (if applicable) on an attachment with an address.

SIGNATURE: *George V. Moricoli*  
 SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**George V. Moricoli President**

**7/29/96 407-498-8462**

CR2E034 (3/96)