SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER JULY 28, 1993. AMOUNT DUE ON OR BEFORE 7/28/93: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

CORPORATION ANNUAL REPORT

14. I certify that the information indicated on this annual leport oath. I further certify that I am an officer for director of the city statutes, and that my name appoint in place 12.18 is 13 f



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

FILED May 05 1998 8:00am Secretary of State

1993 DIVISION OF CORPORATIONS 1. Name and Malling Address of Corporation: DOCUMENT # V43899 THE PEACOCK CORPORATION 855 N.W. 4TH AVE. BOCA RATON FL 33432 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 06/15/1992 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2 Annual Report \$61.25 + \$138.75 Corporation Supplemental Fee + \$25.00 Late Fee \$225.00 MAKE CHECK PAYABLE TO DEPARTMENT OF STATE Not Applicable 2. Mailing Address 2a. Principal Place of Business \$8.75 Additional 855 N.W. 4TH AVE. Fee Required Suite, Apt. #, etc. Suite, Apt, #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 22 27 Added to Fees City & State City & State 7. Nonprofit with IRS 501(c)(3) \$138.75 Supplemental **BOCA RATON FL** 23 Tax Exempt Status 28 Fee Not Required Zip Country 8. This corporation has liability for intangible tax under S. 199.032, 24 29 33432 Florida Statutes Yes Yes □ No 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FARHANGMEHR, SHAHRAM 82 855 NW 4TH AVE. BOCA RATON FL 33432 83 Zip Code 11. Pursuant to the provisions of Sections 6 for the purpose of changing its registers and 607.1 ions 617.0502 and 617.1508 Florida Stalutes, the above-named corporation submits this statement it, or both, in the State of Florida. Such change was authorized by the corporation's board of directors, will, and accept the obligations of, Section 607.0505, Florida Statutes. or registere and accept the obligations of, Section SIGNATURI 12. OFFICERS AN DIRECTORS CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE 1.1 11716 FARHANGMEHR, SHAHRAM 855 NN 4TH AVE. 1.2 NAME 1.2 NAME 1.3 STREET ADDRESS 1.3 STREET ADDRESS BOCA RATON FL 1.4 CITY-ST-ZIP 14 CHY ST ZIP 2.1 TITLE 2171111 2.2 NAME 2.2 NAME: 1 2.3 STREET ADDRESS 2.3 STREET ADDRESS 2.4 City-St-ZiP 2.4 CITY - ST - ZIF 3.1 TITLE 31 11111 3.2 NAME 3 2 NAME 3.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CHY- ST- 7IP 4.1 TITLE 4.1 THLE 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS 4 3 STREET ADDRESS 4.4 CRY-ST-ZIP 4.4 CITY-ST-ZIP 5.1 TOTLE 5.1 TITLE 5 2 NAME 5.2 NAME **5.3 STREET ADDRESS** 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 CITY- ST-ZIP 6.1 TITLE 6 1 TITLE 000002512400 y -05/06/98--01006--026 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS **6.3 STREET ADDRESS** ***150.00 6.4 CITY-ST-ZIP 6.4 CITY-\$1-ZIP

uplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under ation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida