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** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 DOCUMENT #

1. Corporation Name (9) V49300 JAP TECH OF THE PALM BEACHES, INC. Mailing Address Principal Place of Business 410 BUSINESS PARKWAY 410 BUSINESS PARKWAY **BAY 118 BAY 118** ROYAL PALM BEACH FL 33411 3a. Date of Last Report ROYAL PALM BEACH FL 33411 3. Date Incorporated or Qualified 04/26/1995 07/06/1992 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0341895 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199.032 Country Country Zip Zip Yes No Florida Statutes 30 29 24 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name THOMPSON, JOSEPH C. Street Address (P.O. Box Number is Not Acceptable) 410 BUSINESS PARKWAY 82 **BAY 118** 83 ROYAL PALM BEACH FL 33411 Zio Code 64 85 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-ramed 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE (INOT). Registered Agent's greatire required when renotating) Signature, type-) or printed name of registered agent and title Capplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addit.on Change DELETE 117116 TITLE 1.2 NAME THOMPSON, JOSEPH C. NAME 1.3 STREET ADDRESS 410 BUSINESS PKWY #118 STREET ADDRESS ROYAL PALM BEACH FL 1 4 CITY - ST - Z'P CITY-ST-ZIP Change Addition DELFTE 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADORESS 2 4 CITY - S ' - ZIP CHY-ST-ZIF Change Addition DELETE 3 1 1:TLF TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP DITY-ST-ZIP Change Addition DELETE 41 TITLE TITLE 4 2 NAME NAME 4.3 STREET AD/DRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 51 THLE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY - ST ZIP CITY - ST-ZIP Change Addition DELETE 6 1 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS

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 617. Florida Statutes and that my name appears in Block 13 if changed, or on an attachment with an address. TYPED OF FRINTED NAME OF SIGNING OF SCER OF DIRECTOR PICES , DEAT 6/8/96 407 795-4755

6.4 CITY - ST - ZIP

STREET ADDRESS

(3/96)

CR2E034