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 (9)**DOCUMENT #** V51859 BUY LOW-SELL HIGH, INC. Mailing Address Principal Place of Business PO BOX 95 PO BOX 95 KEY COLONY BEACH FL 33051 KEY COLONY BEACH FL 33051 3a. Date of Last Report 3. Date Incorporated or Qualified 04/27/1995 07/20/1992 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0369633 Not Applicable 26 21 \$8.75 Additional Suite, Ant. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199.032. Country Country Ζip Ζφ Yes No Florida Statutes 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name JOSEPH, JOHN P. Street Address (P.O. Box Number is Not Acceptable) 82 9281 STERLING DR. **MIAMI FL 33157 B**3 Zip Code 85 84 City 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, am familiar with, and accept the obligations of Section 607 0505, Florida Statutes. DATE SIGNATURE Signature, typed or printed name of registered agent and trie if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/E)OFFICERS AND DIRECTORS 13. 12. DELETE 11760 TITLE CR2E034 1.2 NAME JOSEPH, GEORGE P NAME 1.3 STREET ADDRESS 1390 WESTON RD STREET ADDRESS 14 CITY - ST - ZIP FT LAUDERDALE FL CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE PT 2.2 NAME JOSEPH, PAUL G NAME 2.3 STREET ADDRESS 1390 WESTON RD STREET ADDRESS 2 4 CITY - ST - ZIP FT LAUDERDALE FL CITY-ST-ZIP Change Addition DELETE 3 1 TITLE TITLE 3.2 NAME JOSEPH, JOHN P 9281 Skrling Ar. Miami, FI 33157 NAME 3.3 STREET ADDRESS -6178-34TH AVENUE, NORTH STREET ADDRESS 3.4 CITY-ST-ZIP ST PETERSBURG FL CITY-ST-ZIP \_\_\_ Change \_\_\_\_ Addition DELETE 4 1 T: FLE THILE 4 2 NAME JOSEPH, KURT G NAME 4.3 STREET ADDRESS PO BOX 510 NA STREET ADDRESS 44 CITY - ST - ZIP KEY COLONY BCH FL CITY - ST - ZIP Change Addition DELETE 5 t TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CHTY - ST-ZIP CITY-ST-ZiP Change Addition DELETE 6 1 TITLE TITLE 6 2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- ZIP 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 other 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 charged of on an attachment with an address.

TO OFFICER OR DIRECTOR

SIGNATURE:

7/11/96