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.) FLORIDA DEPARTMENT OF STATE PROFIT Sandra B. Mortham CORPORATION ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (2)DOCUMENT # V00712 MOORE HOLDINGS, INC. Mailing Address Principal Place of Business 95 EAST LAKE ROAD SKANEATELES NY 13152 95 EAST LAKE ROAD SKANEATLES NY 13152 3a. Date of Last Report 3. Date incorporated or Qualified US 04/07/1995 12/13/1991 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 58-1973589 26 \$8.75 Additional 21 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Suite, Apt #, etc. 27 22 \$5,00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 This corporation has liability for intangible lax under s. 199 032 23 Country Zip Yes No Zip Country 30 29 10. Name and Address of New Registered Agent 25 24 9. Name and Address of Current Registered Agent Name FLETCHER, ROBERT K. Street Address (P.O. Box Number is Not Acceptable) 82 3966 AIRWAY CIR **CLEARWATER FL 34622** 83 Zip Code 85 City FL 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent agreement period when real filter) SIGNATURE Signature, typod or printed more on registered agent and the if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS Change Addition 12. DELETE 11 11116 ĎΡ TITLE CR2E034 MOORE, JAMES R. NAME 13 STREET ADDRESS 95 EAST LAKE ROAD STREET ADDRESS 14 City ST-ZIP SKANEATLES NY Change Addition CITY - ST - ZIP DELETE 21716-6 TITLE 2.2 NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - Z)P Change Addition CITY-ST-ZIP DELETE 3.1 TI*LE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIF Change Addition CITY-ST-ZIP DELETE 41 THTLE TITLE 4 2 NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP Charge Addition CITY - ST - ZIP DELETE 51 THLE TITLE 5.2 NAM6 5 3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP Change Addition CITY - ST - ZIP DELETE 61 THLE TITLE € 2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 14. Loo 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 Statute's 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 12 or Block 13 it changed, or on an attachment with an address 6 4 CHY - ST 7IP SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE