

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # F96000001623 (5)
 1. Corporation Name
FRINGS AMERICA, INC.



Principal Place of Business 341 WEST REMINGTON BLVD. BOLINGBROOK IL 60440	Mailing Address 341 WEST REMINGTON BLVD. BOLINGBROOK IL 60440
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/29/1996	
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 06-1134253	Applied For Not Applicable
23 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
SHAW, TIMOTHY S C/O KIRK PINKERTON 720 SOUTH ORANGE AVENUE SARASOTA FL 34238				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ENENKEL, ANTON DR.	1.2 NAME	
STREET ADDRESS	C/O JONAS-CAHN-STR.9-D	1.3 STREET ADDRESS	
CITY-ST-ZIP	5300 BONN 1, WEST GERMANY	1.4 CITY-ST-ZIP	
TITLE	AS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OPPENHOFF, MICHAEL	2.2 NAME	
STREET ADDRESS	C/O JONAS-CAHN-STR.9-D	2.3 STREET ADDRESS	
CITY-ST-ZIP	5300 BONN 1, WEST GERMANY	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSON, TRENT ESQ.	3.2 NAME	S Anderson, J. Trent, Esq.
STREET ADDRESS	120 SOUTH LASALLE STREET	3.3 STREET ADDRESS	190 South LaSalle Street
CITY-ST-ZIP	CHICAGO IL 60603	3.4 CITY-ST-ZIP	Chicago, IL 60603
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	VP Ken Watt
STREET ADDRESS		4.3 STREET ADDRESS	341 W. Remington Blvd.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Bolingbrook, IL 60440
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE: *G.T. Anderson* **2/20/98 (312) 701-7365**

CP2E034 (10/97)