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04/21/99 90222 022

PROFIT CORPORATION ANNUAL REPORT 1999



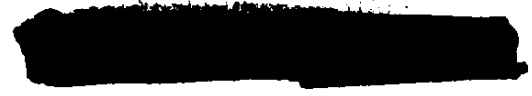
FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000002105

1. Corporation Name ZENTOX CORPORATION

Principal Place of Business 2140 N.E. 36TH AVENUE OCALA FL 32670 Mailing Address 2140 N.E. 36TH AVENUE OCALA FL 32670

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25 26 27 28 29 30

3. Date Incorporated or Qualified 04/22/1997 4. FEI Number 59-3401503 Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent REESE, JOHN S 2140 N.E. 36TH AVENUE OCALA FL 32670

10. Name and Address of New Registered Agent 81 Name SVRLUGA, RICHARD C. 82 Street Address 2140 NE 36TH AVENUE 83 84 City OCALA FL 85 Zip Code 32670

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 Richard SVRLUGA 4/3/99

12. OFFICERS AND DIRECTORS CT SVRLUGA, RICHARD 31 MILK STREET BOSTON MA 02109 VC PARK, DREW E JR 2355 MAIN STREET, SUITE 100 WYVINE CA 92714 DV BERMAN, ELLIOT ONE ADAMS STREET, P-5 QUINCY MA 02169 D CARUSO, JOSEPH 50 BAY COLONY DRIVE WESTWOOD MA 02090 S LEMELMAN, HERBERT ONE BOSTON PLACE, SUITE 3225 BOSTON MA 02108 D ALPERIN, EDWARD 312 DIRECTORS DRIVE KNOXVILLE TN 37923

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE D STEWART, EDWARD J. 31 MILK STREET BOSTON, MA 02109 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Richard SVRLUGA 4/3/99 (617) 542-0531