

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

FILED
May 18 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 # F97000004839 (3)
1. Corporation Name
EXCEL TRADE GROUP, INC.



Principal Place of Business: 18938 ST LAURENT DR. LUTZ FL 33549
Mailing Address: 18938 ST LAURENT DR. LUTZ FL 33549

DO NOT WRITE IN THIS SPACE

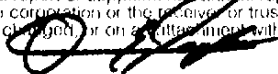
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1527 N Dale Mabry	26 1527 N Dale Mabry			09/16/1997	
22 104	27 104			4. FEI Number	
23 Lutz FL	28 Lutz FL			68-0363223	
24 33549	29 33549			5. Certificate of Status Desired <input type="checkbox"/>	
25 PASCO	30 PASCO			\$8.75 Additional Fee Required	
g. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
COHN, ROY W 3321 HENDERSON BLVD TAMPA FL 33609		81 Name			
		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City			
		FL		85 Zip Code	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees					

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD ZEIGLER, RICH	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	555 FURNACE HILLS PIKE	1.2 NAME	
CITY-ST-ZIP	LITIZ PA	1.3 STREET ADDRESS	
TITLE	VD AMES, MIKE	1.4 CITY-ST-ZIP	
STREET ADDRESS	3000 AUBURN COURT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP	AUBRUN HILLS MI	2.2 NAME	
TITLE	VD BERTOLINI, LARRY	2.3 STREET ADDRESS	
STREET ADDRESS	21 WEST 7TH ST	2.4 CITY-ST-ZIP	
CITY-ST-ZIP	SANTA ROSA CA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D HOWTON, STAN	3.2 NAME	
STREET ADDRESS	5800 MEXICO RD., STE 2	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST PETERS MO	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
TITLE		4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
CITY-ST-ZIP		5.2 NAME	
TITLE		5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		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 on an attachment with an address

SIGNATURE:  VERNON F TAYLOR 5-1-98 8139484114

CR2E034 (10/97)