

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

FILED
Jan 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P08497 (0)
 1. Corporation Name
INCH OF GOLD, INC.



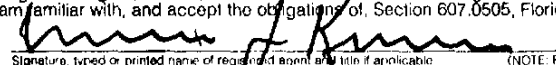
Principal Place of Business 3965 INVESTMENT LANE A-9 RIVIERA BEACH FL 33404	Mailing Address 3965 INVESTMENT LANE A-9 RIVIERA BEACH FL 33404
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/20/1985	
21	22	26	27	4. FEI Number 88-0184002	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	25	28	29	30
Zip		Country		Zip	
Country		Country		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						
KRETSCHMAR, WILLIAM J. 5622 PENNOCK POINT RD JUPITER FL 33458				81	Name			Kretschmar, William J.		
				82	Street Address (P.O. Box Number is Not Acceptable)			2696 N.W. 64th Blvd.		
				83	City			Boca Raton	85	Zip Code 33496
				84	State			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. 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	PD	<input type="checkbox"/> DELETE		1.1 TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KRETSCHMAR, WILLIAM J.			1.2 NAME	Kretschmar, William J.		
STREET ADDRESS	570 OCEAN DR PENTHOUSE #2			1.3 STREET ADDRESS	2696 N.W. 64th Blvd.		
CITY-ST-ZIP	JUNO BEACH FL			1.4 CITY-ST-ZIP	Boca Raton, FL 33496		
TITLE	VST	<input type="checkbox"/> DELETE		2.1 TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KRETSCHMAR, WILLIAM J.			2.2 NAME	Kretschmar, William J.		
STREET ADDRESS	570 OCEAN DR PENTHOUSE #2			2.3 STREET ADDRESS	2696 N.W. 64th Blvd.		
CITY-ST-ZIP	JUNO BEACH FL			2.4 CITY-ST-ZIP	Boca Raton, FL 33496		
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE		<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	KRETSCHMAR, WILLIAM J.			3.2 NAME	Kretschmar, William J.		
STREET ADDRESS	570 OCEAN DR PENTHOUSE #2			3.3 STREET ADDRESS	2696 N.W. 64th Blvd.		
CITY-ST-ZIP	JUNO BEACH FL			3.4 CITY-ST-ZIP	Boca Raton, FL 33496		
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		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		<input type="checkbox"/> DELETE		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 on an attachment with an address.

SIGNATURE:  January 8, 1998 (561) 842-3103

CR2E034 (10/97)