

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

FILED
Feb 02 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 # **P28051** (1)
1. Corporation Name
ED FRIEND, INC.



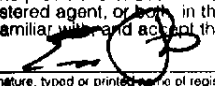
Principal Place of Business 1150 18TH STREET, NW SUITE 225 WASHINGTON DC 20036	Mailing Address 1150 18TH STREET, NW SUITE 225 WASHINGTON DC 20036
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/02/1990	
		4. FEI Number 52-1659394		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 or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No			

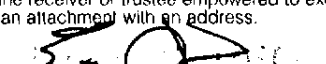
9. Name and Address of Current Registered Agent BENCIVENGA, DAVID F. 3321 STEEPLECHASE LANE KISSIMMEE FL 34746		10. Name and Address of New Registered Agent 81 Name Edward H. Friend 82 Street Address (P.O. Box Number is Not Acceptable) 19569 Bayview Rd #122 83 84 City Boca Raton FL 85 Zip Code 33433	
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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	PTD	1.1 TITLE	☐ Change ☐ Addition
NAME	FRIEND, EDWARD H.	1.2 NAME	
STREET ADDRESS	1150 18TH STREET #225	1.3 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20036	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	☐ Change ☐ Addition
NAME	FRIEND, ELEANOR B.	2.2 NAME	
STREET ADDRESS	1150 18TH STREET #225	2.3 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20036	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	CROWDER, A. N	3.2 NAME	
STREET ADDRESS	6 CANOE TRAIL	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAVEN CT 06820	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	☐ Change ☐ Addition
NAME	MCCRORY, ROBERT T	4.2 NAME	
STREET ADDRESS	3131 BROADWAY E	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA 98102	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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  1/24/98 200 785 4995

CR2E034 (10/97)