


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

**FILED**  
**Apr 23 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000058972 (9)**  
 1. Corporation Name  
**EXCEL TEAM REALTY, INC.**



Principal Place of Business <b>1847 SE PT. ST. LUCIE BLVD                  PT. ST. LUCIE FL 34952                  US</b>	Mailing Address <b>1847 SE PT. ST. LUCIE BLVD                  PT. ST. LUCIE FL 34952                  US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**08/23/1993**

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

4. FEI Number  
**65-0430976**

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

**QUIBAIN, IMAD S  
 1847 SE PT. ST. LUCIE BLVD  
 PT. ST. LUCIE FL 34952**

10. Name and Address of New Registered Agent

81 Name **Bruce van Voorhis**

82 Street Address (P.O. Box Number is Not Acceptable)  
**1847 SE Port St Lucie Blvd**

83

84 City **Port St. Lucie FL** 85 Zip Code **34952**

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 *Bruce van Voorhis* DATE **4/13/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTS QUIBAIN, IMAD S	1.1 TITLE	Bruce van Voorhis
NAME	1847 SE PORT ST LUCIE BLVD	1.2 NAME	1847 SE Port St Lucie Blvd
STREET ADDRESS	PORT ST LUCIE FL	1.3 STREET ADDRESS	Port St. Lucie FL 34952
CITY-ST-ZIP	<input checked="" type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	V COPPOCK, DAVID L.	2.1 TITLE	VP/S Coppock, David L.
NAME	1847 SE PORT ST LUCIE BLVD	2.2 NAME	1847 SE Port St Lucie Blvd.
STREET ADDRESS	PORT ST LUCIE FL	2.3 STREET ADDRESS	Port St Lucie FL 34952
CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Treasurer Rhoda Javier
NAME		3.2 NAME	2202 SE Carnation
STREET ADDRESS		3.3 STREET ADDRESS	Port St. Lucie FL 34952
CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP	<input type="checkbox"/> DELETE	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 *Bruce van Voorhis* DATE **4/14/98** **561 337 4422**

CP2E034 (10/97)