

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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

98 APR -7 AM 10:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P93000061835 (3)  
1. Corporation Name  
FLYING COLORS DESIGN IN MOTION, INC.



Principal Place of Business: 601 BAYSHORE BLVD STE. 640 TAMPA FL 33606 US  
Mailing Address: C/O J. BOB HUMPHRIES/FOWLER WHITE GILLEN 501 E. KENNEDY BLVD., SUITE 1700 TAMPA FL 33602

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
21 1517 EAST SEVENTH AV  
22 SUITE D  
23 TAMPA, FL  
24 33605  
25 USA  
2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

3. Date Incorporated or Qualified: 09/01/1993  
4. FEI Number: 59-3200162  
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  
HUMPHRIES, J B  
501 E. KENNEDY BLVD.  
SUITE 1700  
TAMPA FL 33602

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code: 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  
TITLE: DP  
NAME: MILLER, LYNN E  
STREET ADDRESS: 3709 W. SAN PEDRO ST.  
CITY-ST-ZIP: TAMPA FL  
TITLE: DVST  
NAME: RICHARDS, CHRIS K  
STREET ADDRESS: 2611 BAYSHORE BLVD.#1806  
CITY-ST-ZIP: TAMPA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP  
21 TITLE  
22 NAME  
23 STREET ADDRESS  
24 CITY-ST-ZIP  
31 TITLE  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP  
41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP  
51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP  
61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

400002482834 003 5  
-04/08/98 - 01686  
\*\*\*\*150.00 \*\*\*\*150.00

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: Lynn Edward Miller, President LEMiller 3/18/98 (813) 248-8544

CR2E084 (10/97)