

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

FILED
Jan 23 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 # P94000013919 (3)
 1. Corporation Name
CHRISTOPHER DEAN, INC.



Principal Place of Business 12605 MALLET CIRCLE WEST PALM BEACH FL 33414	Mailing Address 12605 MALLET CIRCLE WEST PALM BEACH FL 33414
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2659 Sheltingham Drive Suite, Apt. #, etc.		2a. Mailing Address 26 2659 Sheltingham Drive Suite, Apt. #, etc.		3. Date Incorporated or Qualified 02/18/1994		4. FEI Number 65-0469652		Applied For Not Applicable	
22 City & State 23 West Palm Beach FL		27 City & State 28 West Palm Beach, FL		5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
24 33414 25 USA		29 33414 30 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33414 25 USA		29 33414 30 USA		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		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 D'AMELIO, FRANK 12605 MALLET CIRCLE WEST PALM BEACH FL 33414				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			

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	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D'AMELIO, FRANK	1.2 NAME	D'Amelio, Frank
STREET ADDRESS	12605 MALLET CIRCLE	1.3 STREET ADDRESS	2659 Sheltingham Drive
CITY-ST-ZIP	WEST PALM BEACH FL 33414	1.4 CITY-ST-ZIP	West Palm Beach, Florida 33414
TITLE	DST <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PERRICONE, JOSEPHINE	2.2 NAME	Perricone, Josephine
STREET ADDRESS	12605 MALLET CIRCLE	2.3 STREET ADDRESS	2659 Sheltingham Drive
CITY-ST-ZIP	WEST PALM BEACH FL 33414	2.4 CITY-ST-ZIP	West Palm Beach, Florida 33414
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
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: FRANK D'AMELIO 1/12/98 1-800-645-5720 1-561-795-6520

CR2E034 (10/97)