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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jan 29 1997 8:00am Secretary of State

DOCUMENT # P94000093481 (7)

SUGAR APPRAISING & CONSULTING, INC.

1100 SOUTH TAMIAMI TRAIL SUITE 204 SUITE 204 SUITE 204 SUITE 204 SARASOTA FL 34236-9121 3. Date Incorporated or Qualified O1/01/1995 O6/25/1996 06/25/1996												
SARASOTA F. 3428 SARASOTA F.	Principal Place of Business Mailing Address							EBLIE IBIÐÐ	HIN DIEDI	IMIMI IIAI		
SARASOTA FL 94298 SARASOTA FL 94298 2. Principal Place of Business 2. Mailing Address 3. Date incorporated or Qualified 08/28/1998 2. Principal Place of Business 2. Mailing Address 4. FEI Number 65-0530001 Applied For 1998 Salte, Apr. #, etc. 5. Cetificate of Batus Dustrad Pea Regulated Fee Regulated City & State 2. City & State 2. City & State 2. City & State 2. Date of Country 7/2 Country Pruntfull Controlled on State States Dustrad Pea Regulated Fee Regul		amiami trail		AIL								
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28 Country Trust Fund Contribution Added to Fees Add	22		27	7			5. Certificate of Status Desired		,			
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28					ntrv			<u> </u>				
S. Name and Address of Current Registered Agent SUGAR, HOWARD 1100 S. TAMAMI TRAIL SUITE 204 SARASOTA FL 34236 83 84	24	 			,							
SUTIE 201 S. TAMAMI TRAIL SUTIE 201 SARASOTA FL 34236 84 City FL 85 Zip Code 11. Pursuant to the provisions of Socians 607 6502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent Len trainsfar with, und accept the obligations of, Section 607 5056, Prior Statutes SIGNATURE Signature 1 of the provisions of Socians 607 6050 agent are in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent Len trainsfar with, under accept the obligations of, Section 607 5056, Prior Statutes SIGNATURE Signature 1 of the provisions of Socians 607 5056, Prior Statutes SIGNATURE Signature 1 of the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent Len trainsfar with, under accept the obligations of, Section 607 5056, Prior Statutes SIGNATURE SIGNATURE SIGNATURE SIGNATURE DELETE 1.1 TITLE DATE DATE 1.2 NAME SUGGAR, HOWARD SIGNATURE 1.2 NAME SIRRET ADDRESS CITY-SI-2P DELETE 2.1 TITLE Change Addition Addition AMA SIRRET ADDRESS CITY-SI-2P DELETE 3.1 TITLE Change Addition Addition AMA SIRRET ADDRESS SIRRET A		9. Name and Address of Currer			10. Name and Address of New Re	gistered /	Lgent					
SUTTE 204 SARASOTA FL 34236 88 80 60 City FL 85 City FL FL 85 City FL FL FL FL FL FL FL FL FL F	SUG	ar, Howard			81	Name						
SARASOTA FL 34236 85 27 Code						Street Addr	ess (P.O. Box Number is Not Acceptat	ole)				
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 agent to rive or control agent to the provisions of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. Thereby accept the appointment as registered agent to rive admit a manufacture, the obligations of Section 607 0505, Florida Seator by the corporation's board of directors. Thereby accept the appointment as registered agent and an appointment as registered agent and an appointment as registered agent and accept true obligations of Section 607 0505, Florida Seator by the corporation's board of directors. Thereby accept the appointment as registered agent and accept true obligations of Section 607 0505, Florida Seator seator of the provision of the population agent and the provision of the population of the					93	***************************************						
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SIGNATURE	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.											
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12												
Title	Signature: typical or printed name of registered agent and the if applicable (NOTE: Registered					nt signature require						
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		by certify that the information supplies	d with this filma does not quali				In Section 119 07(3Vi) Florida Statute	s I further	cortifu	that the		

SIGNATURE: JULIAN HOLLARD SHORK (PRES.) 1-24-97 941-366-7777