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Mar 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000069588 (8)

1. Corporation Name
HEAD II TOE CONCEPTS, INC.



Principal Place of Business Mailing Address
34064 U.S. 18TH NORTH 34064 U.S. 19TH NORTH
PALM HARBOR FL 34683 PALM HARBOR FL 34683

3. Date Incorporated or Qualified 09/06/1995
3a. Date of Last Report 03/11/1996
4. FEI Number 59-3340177 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 has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21. State, Apt. #, etc. 26. State, Apt. #, etc.
22. City & State 27. City & State
23. Zip Country 28. Zip Country
24. 25. 29. 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CSEKITS, PATRICIA
2155 PINNACLE CIRCLE NORTH
PALM HARBOR FL 34684

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City FL 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: Patricia Csekits, Pres 3/10/97 (813) 781-6621
(NOTE: Registered Agent signature required when reinstating)

Table with 12 rows for Officers and Directors. Row 1: D CSEKITS, PATRICIA, 2155 PINNACLE CIRCLE NORTH, PALM HARBOR FL 34684.

Table with 13 rows for Additions/Changes to Officers and Directors in 12. Includes fields for Title, Name, Street Address, City, ST, ZIP.

14. I do 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: Patricia Csekits, Pres 3/10/97 (813) 781-6621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CRCE034 (9/96)