


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

FILED
Jan 30 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 # P96000048947 (1)
 1. Corporation Name
AVATAR SENTRY (U.S.), INC.



Principal Place of Business 5221 GRANADA BOULEVARD SEBRING FL 33872	Mailing Address 7509 GRANT STREET HOLLYWOOD FL 33024-5353
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DO NOT WRITE IN THIS SPACE

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 25	29 30

3. Date Incorporated or Qualified
06/07/1996

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
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
BEYER, RUSSELL T ESO
3015 N. OCEAN BOULEVARD #3-H
FORT LAUDERDALE FL 33308

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	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REHM, M P	1.2 NAME	
STREET ADDRESS	5221 GRANADA BOULEVARD	1.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL 33872	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KORAL, S.A.	2.2 NAME	
STREET ADDRESS	7509 GRANT STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL 33024	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KORAL, A.M.	3.2 NAME	KORAL, A.M.
STREET ADDRESS	7509 GRANT STREET	3.3 STREET ADDRESS	7509 GRANT ST
CITY-ST-ZIP	HOLLYWOOD, FL 33024	3.4 CITY-ST-ZIP	HOLLYWOOD, FL 33024
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GERALD ALEXANDER	4.2 NAME	GERALD ALEXANDER
STREET ADDRESS	7509 GRANT STREET	4.3 STREET ADDRESS	7509 GRANT ST
CITY-ST-ZIP	HOLLYWOOD, FL 33024	4.4 CITY-ST-ZIP	HOLLYWOOD, FL 33024
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TERRY V. KOONTZ	5.2 NAME	TERRY V. KOONTZ
STREET ADDRESS	7509 GRANT	5.3 STREET ADDRESS	7509 GRANT STREET
CITY-ST-ZIP	HOLLYWOOD, FL 33024	5.4 CITY-ST-ZIP	HOLLYWOOD FL 33024
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	700002417797
STREET ADDRESS		6.3 STREET ADDRESS	-02/02/98--01005--029
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***158.75

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 _____ DATE _____

CR2E034 (10/97)