


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

0221170

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90104 006 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000087866

1. Corporation Name
ESSEX CAPITAL CORP.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 260 CRANDON BLVD SUITE 26 KEY BISCAIYNE FL 33149	Mailing Address 260 CRANDON BLVD SUITE 26 KEY BISCAIYNE FL 33149
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3. Date Incorporated or Qualified 10/24/1996	4. FEI Number 65-0706287	Applied For <input type="checkbox"/> Not Applicable
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21. Principal Place of Business Suite, Apt. #, etc.	22. Mailing Address Suite, Apt. #, etc.	23. City & State	24. Zip	25. Country
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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 the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent CORDOBA, MARIA 260 CRANDON BLVD SUITE 26 KEY BISCAIYNE FL 33149	
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10. Name and Address of New Registered Agent	
B1 Name	B2 Street Address (P.O. Box Number is Not Acceptable)
B3	B4 City
B5 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 *Maria Cecilia Cordoba* **MARIA CECILIA CORDOBA** 6003 **1/7/99** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORDOBA, ALFONSO	1.2 NAME	
STREET ADDRESS	260 CRANDON BLVD, STE 26	1.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	V.P., Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORDOBA GOOD, MARIA CECILIA	2.2 NAME	
STREET ADDRESS	260 CRANDON BLVD, STE 26	2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	V.P. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOOD, SIDNEY S	3.2 NAME	
STREET ADDRESS	260 CRANDON BLVD, STE 26	3.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	V.P. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORDOBA, VIRGINIA	4.2 NAME	
STREET ADDRESS	260 CRANDON BLVD, STE 26	4.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	V.P. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORDOBA, CECILIA	5.2 NAME	
STREET ADDRESS	260 CRANDON BLVD, STE 26	5.3 STREET ADDRESS	
CITY-ST-ZIP	KEY BISCAIYNE FL 33149	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, with all other like empowered.

SIGNATURE: *Maria Cecilia Cordoba* **MARIA CECILIA CORDOBA** **1/7/99** Date **301-361-9800** Daytime Phone #

CR2E034 (11/98)