

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

FILED

**Feb 10 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 # S93669 (7)

1. Corporation Name
STEVO, INC.



Principal Place of Business 1025 S FEDERAL HWY SUITE 401 BOYNTON BEACH FL 33435 US	Mailing Address 301 SE 4th St. 140 INTRACOASTAL POINTE DRIVE SUITE 401 JUPITER FL 33477
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 301 SE 4 Street Suite, Apt. #, etc. 22 City & State 23 Boynton Beach, FL Zip 24 33435 Country 25 PBC	2a. Mailing Address 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
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3. Date Incorporated or Qualified 11/12/1991	4. FEI Number 65-0306864	Applied For Not Applicable
5. Certificate of Status Desired <input 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

**SELDIN, KEITH A.
140 INTRACOASTAL POINTE DR.
SUITE 401
JUPITER FL 33477**

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
			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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	DVP	<input type="checkbox"/> DELETE
NAME	STEPHENS, ROBERT	
STREET ADDRESS	10915 GLENEAGLES RD	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE	DP	<input type="checkbox"/> DELETE
NAME	VOLPE, FRANCIS B.	
STREET ADDRESS	10466 DENOEU RD	
CITY-ST-ZIP	BOYNTON BCH. FL	
TITLE	OT	<input type="checkbox"/> DELETE
NAME	STEPHENS, TINA	
STREET ADDRESS	10915 GLEN EAGLES RD	
CITY-ST-ZIP	BOYNTON BCH FL	
TITLE	OT	<input type="checkbox"/> DELETE
NAME	VOLPE, CHRISTINE	
STREET ADDRESS	10466 DENOEU RD	
CITY-ST-ZIP	BOYNTON BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 by an attachment with an address.

SIGNATURE: *Robert Stephens VP* **Robert Stephens VP** 1-13-98 561-732-9418

CR2E034 (10/97)