

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

FILED
May 07 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 # P97000071875 (3)
 1. Corporation Name
ALL-POINTS REAL ESTATE & INVESTMENT CORP.



Principal Place of Business 26100 US HWY 19 NORTH STE 408 CLEARWATER FL 34621	Mailing Address 26100 US HWY 19 NORTH STE 408 CLEARWATER FL 34621
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DO NOT WRITE IN THIS SPACE

21 2189 Cleveland St. Suite, Apt. #, etc 22 Suite 206 City & State 23 Clearwater, FL Zip 24 33765	25 Pinellas Country	26 2189 Cleveland St. Suite, Apt. #, etc. 27 Suite 206 City & State 28 Clearwater, FL Zip 29 33765	30 Pinellas Country
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3. Date Incorporated or Qualified 08/19/1997	
4. FEI Number 59-3464145	Applied For <input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CORPORATE CREATIONS ENTERPRISES INC
4521 PGA BLVD #211
PALM BEACH GARDENS FL 33418

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: *Joseph Cannizzaro* **Joseph Cannizzaro** **4/26/98** DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	RABBITT, BETTE	
STREET ADDRESS	26100 US HWY 19 NORTH STE 408	
CITY-ST-ZIP	CLEARWATER FL 34621	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MOTALING, WILLIAM	
STREET ADDRESS	26100 US HWY 19 NORTH STE 408	
CITY-ST-ZIP	CLEARWATER FL 34621	
TITLE	D	<input type="checkbox"/> DELETE
NAME	CANNIZZARO, JOSEPH	
STREET ADDRESS	26100 US HWY 19 NORTH STE 408	
CITY-ST-ZIP	CLEARWATER FL 34621	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	PRESIDENT
2.3 STREET ADDRESS	2189 CLEVELAND ST #206
2.4 CITY-ST-ZIP	CLEARWATER FL 33765
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	S/TREASURER
3.3 STREET ADDRESS	2189 CLEVELAND ST #206
3.4 CITY-ST-ZIP	CLEARWATER FL 33765
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 its 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 in an attachment with an address.

SIGNATURE: *Joseph Cannizzaro* **JOSEPH CANNIZZARO** **4/26/98** **813 442-3080**

CR2E034 (10/97)