

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

FILED
Mar 23, 1999 8:00 am
Secretary of State

03-23-1999 90052 021 ***150.00

0074560

PROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000067550

1. Corporation Name
THE BIANCO GROUP, INC.



Principal Place of Business
 243 QUAYSIDE CIRCLE
 MAITLAND FL 32751

Mailing Address
 243 QUAYSIDE CIRCLE
 MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/03/1998

4. FEI Number

59-3526104

Applied For
 Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

City & State

City & State

6. Election Campaign Financing - Trust Fund Contribution

\$5.00 May Be Added to Fees

Zip

Country

Zip

Country

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BIANCO, THOMAS
 243 QUAYSIDE CIRCLE
 MAITLAND FL 32751

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
 NAME **D BIANCO, THOMAS**
 STREET ADDRESS **243 QUAYSIDE CIRCLE**
 CITY-ST-ZIP **MAITLAND FL 32751**

1.1 TITLE Change Addition

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

1.2 NAME

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

1.3 STREET ADDRESS

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

1.4 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

2.1 TITLE Change Addition

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

2.2 NAME

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

2.3 STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

Thomas P. Bianco
 THOMAS P. BIANCO

3-22-99

Date

407-493-3242

Daytime Phone #

CR2E034 (11/98)