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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 01, 1999 8:00 am Secretary of State 04-01-1999 90103 040 ***150.00

DOCUMENT # L72273

MORGAN & MORGAN ENTERPRISES INC.

Principal Place of Business 122 MaRIMA DEL REY CT CLEARWATER FL 33767 US 2 Principal Place of Business 2 a. Mailing Address 2 butte, Apt. #, etc. 2 clearwater R. 23767 US 2 Principal Place of Business 2 a. Mailing Address 3 . Date Incorporated or Qualified 05/09/1990 3 . Date Incorporated or Qualified 05/09/1990 3 . Date Incorporated or Qualified 05/09/1990 3 . Personal Process 4 . FEI Number Applied For Sequence Not Applicable
12 MARINA DEL REY OF CLEARWATER FL 33767 12 MARINA DEL REY OF CLEARWATER FL 34630 13 Marine del marine of registered agent of both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered directors. I hereby accept the appointment as registered agent of 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 of personal registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and marine of registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept of the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept of the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. The accept the accept the accept the appointment as registered agent and accept the obligations of, Section 607,0505, Florida Statutes. 10
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28
9. Name and Address of Current Registered Agent MORGAN, BEN W. 122 MARINA DEL REY CT CLEARWATER FL 34630 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 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 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE VP DELETE 1.1 TITLE 1.1 TITLE 1.2 TOTANGE SECONDARY 1.3 STREET ADDRESS 1.4 TITLE 1.4 TITLE 1.4 TITLE 1.5 TOTANGE SECONDARY 1.5 TOTANGE SECONDA
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CLEARWATER FL 34630 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 agent, and the provisions of Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or iprited 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 VP DELETE 1.1TILE CHARGES TO OFFICERS AND DIRECTORS IN 12. TITLE WARRINA DEL REY CT 13. STREET ADDRESS CITY-ST-ZIP 13. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 14. CITY-ST-ZIP 33. TITLE CLEARWATER FL 22. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 22. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 23. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 24. CITY-ST-ZIP 33. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 24. CITY-ST-ZIP CLEARWATER FL 24. CITY-ST-ZIP CLEARWATER FL 23. STREET ADDRESS CITY-ST-ZIP CLEARWATER FL 24. CITY-ST-ZIP CLEARWATER FL 25. Change Addition Addition Clear Clear Clear Clearwater Agent as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent above-named corporation's board of directors. I hereby accept the appointment as registered agent above-named corporation's board of directors. I hereby accept the appointment as registered agent above-named corporation's board of directors. I hereby accept the appointment as registered agent advantage of changing in the corpora
CLEARWATER FL 34630 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 and single if applicable. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE VP ORGAN, BEN W. 12.NAME WORGAN, BEN W. 12.NAME STREET ADDRESS CITY-ST-ZIP CLEARWATER FL DELETE 14. CITY-ST-ZIP MORGAN, CAROL A. 122 MARINA DEL REY CT 23 STREET ADDRESS CITY-ST-ZIP TITLE MORGAN, CAROL A. 124 MARINA DEL REY CT CLEARWATER FL DELETE 31 TITLE Change Addition Change Addition Change Addition Change Addition Addition Change Addition
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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, hyped or printed name of registered agent and stile if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
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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: