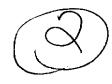
SECOND' NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT YOUR ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Jul 13 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS (9) C & P. INC. Principal Place of Business Maiting Address 1104 HOLLY LANE 1104 HOLLY LANE JACKSONVILLE FL \$2207 JACKSONVILLE FL 32207 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/19/1941 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-607583 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. X Yes No Zip Country Zip Country 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CARANTZAS, KATHERINE N. 1104 HOLLY LANE Street Address (P.O. Box Number is Not Acceptable) 82 JACKSOŃVILLE, FLORIDA 83 32207 City Zip Code 85 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.

NATURE AND WALLEY AND KATHERIE. ALL CAVOURTED REC Kathering Carantzas SIGNATURE CR2E034 (5/98) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition CATANTZAS, KATHERINE N 1.2 NAME NAME 1104 HOLLY LANE STREET ADDRESS 1.3 STREET ADDRESS Ja**o**ksonville, fl 00000 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE CARANTZAS, TINA C. 2.2 NAME NAME 1504 KINGSWOOD RD 2.3 STREET ADDRESS STREET ADDRESS JAOKSONVILLE, FL 00000 2.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 3.1 TOT/E Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change 5.1 TITLE DELETE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition 6.1 TITLE DELETE TITLE 2000025882**5** -07/14/98--01050--024 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS ***150.00 6.4 CITY-ST-ZIP 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, ozon an attachment with an address.

FILED



TO WHOM IT MAY CONCERN

I am enclosing our 1998 corporation annual report along with our check in the amount of \$150.

This is the first notice we received concerning the request for filing and paying this amount, therefore we would respectfully request that the late filing and paying penalty not be assessed us.

We take our responsibility seriously and always pay these fees when requested as you can certainly see by our record. Please confirm by return mail that we are once again in good standing and that our account has no balance due to the Florida Department of State.

Thank you.

Sincerely yours,

Katherine N. Carantzas, President

Lh Carantza

C & P, Inc.