

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

FILED

**Jun 22 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 155324 (7)

1. Corporation Name
SOMO CORPORATION



Principal Place of Business
~~8 WEST 8TH STREET~~
TULSA OK 74101
US

Mailing Address
~~8 WEST 8TH STREET~~
P.O. BOX 1379
TULSA OK 74101
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 P.O. BOX 1379
Suite, Apt. #, etc
22 City & State
23 Zip Country
24 25

2a. Mailing Address
26 P.O. BOX 1379
Suite, Apt. #, etc
27 City & State
28 Zip Country
29 30

3. Date Incorporated or Qualified
06/29/1948

4. FEI Number
73-0717941

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**MOORE, TUCKER
173 BATH CLUB BLVD NO
N. REDINGTON BCH FL 33738**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
16400 Gulf Blvd, Suite 507
83
84 City **Redington Beach** FL 85 Zip Code **33708**

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 _____ (NAME Registered Agent signature is required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PST	<input type="checkbox"/> DELETE
NAME	MOORE, C T	
STREET ADDRESS	16700 GULF BLVD	
CITY-ST-ZIP	N REDINGTON BEACH FL 33708	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CARTWRIGHT, MARY K	
STREET ADDRESS	8308 E PALOMINO RD	
CITY-ST-ZIP	PHOENIX AZ 85018	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	MOORE, MELISSA A	
STREET ADDRESS	173 BATH CLUB BLVD NO	
CITY-ST-ZIP	N REDINGTON BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	MOHR, B A	
STREET ADDRESS	99 TUDOR PL	
CITY-ST-ZIP	KENILWORTH IL	
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	16400 Gulf Blvd, Suite 507
1.4 CITY-ST-ZIP	Redington Beach FL 33708
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	16400 Gulf Blvd, Suite 507
3.4 CITY-ST-ZIP	Redington Beach FL 33708
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	16400 Gulf Blvd, Suite 507
4.4 CITY-ST-ZIP	Redington Beach, FL 33708
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, or as an attachment with an address.

SIGNATURE: _____ DATE: **4/22/98**

CR2E034 (10/97)