


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

FILED
Mar 26 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 # **236258** (0)

1. Corporation Name
HARBOR BEACH TRAVEL SERVICE, INC.



Principal Place of Business 1515 SE 17TH ST SUITE 133 FT LAUDERDALE FL 33316 US	Mailing Address 1515 SE 17TH ST SUITE 133 FT LAUDERDALE FL 33316 US
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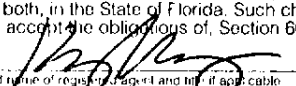
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 708 SE 17th St.	2a. Mailing Address 26 708 SE 17th St.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 22 Ft. Lauderdale FL	City & State 27 Ft. Lauderdale FL
Zip 23 33316	Country 25 USA
Country 24 USA	Zip 29 33316
	Country 30 USA

3. Date Incorporated or Qualified 05/07/1960
4. FEI Number 59-0907149
Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" 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 SHARPE, KIMBERLY A 1515 SE 17TH STREET #133 FT LAUDERDALE FL 33316	10. Name and Address of New Registered Agent 81 Name KWANZA C. CLAY 82 Street Address (P.O. Box Number is Acceptable) 708 SE 17th St 83 84 City FT LAUDERDALE FL 85 Zip Code 33316
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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  (NOTE: Registered Agent signature required when reinstating) **3-20-98** DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PST <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHARPE, KIMBERLY A.	1.2 NAME	
STREET ADDRESS	1625 SE 10 AVE #802	1.3 STREET ADDRESS	
CITY - ST - ZIP	FT. LAUDERDALE FL	1.4 CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	PVTS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLAY, KWANZA	2.2 NAME	CLAY, KWANZA C.
STREET ADDRESS	5250 SE 4TH STREET	2.3 STREET ADDRESS	12480 NW 15th ST #301
CITY - ST - ZIP	PLANTATION FL	2.4 CITY - ST - ZIP	SUNRISE FL 33323
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 on an attachment with an address.

SIGNATURE  **3-20-98** **054-711-2111**

CR2E034 (10/97)