

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

FILED
Feb 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 # **311219** (0)

1. Corporation Name
SEBRING LAND AND SALES CORPORATION

Principal Place of Business
**P.O. BOX 20868
RIO PIEDRAS, PUERTO RICO 00928
PR**

Mailing Address
**P.O. BOX 20868
RIO PIEDRAS, PUERTO RICO 00928
PR**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 11/23/1966	
4. FEI Number 59-1237192	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input 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	

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.		
22 City & State	27 City & State		
23 Zip	28 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent LIVINGSTON, JAMES L 445 SOUTH COMMERCE AVENUE SEBRING FL 33870	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code FL

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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	P MONTILLA-ROJO, CECI ROAD 19, INTERSECTION 2 PUEBLO VIEJO, GUAYNABO 00966	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	V TORO, RAFAEL ROAD 19, INTERSECTION 2 PUEBLO VIEJO, GUAYNABO 00966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	V TORRES - CARMEN METRO OFFICE PARK, SUITE 303 TEXACO PLAZA, GUAYNABO 00968
<input type="checkbox"/> DELETE	T ROJO, MARIA E ROAD 19, INTERSECTION 2 PUEBLO VIEJO, GUAYNABO 00966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	T ROJO-PRENDES, BEATRIZ 7346 S.W. 57 TH. AVENUE SOUTH MIAMI, FLORIDA 33143
<input type="checkbox"/> DELETE	S MIRANDA, MARITZA ROAD 19, INTERSECTION 2 PUEBLO VIEJO, GUAYNABO 00966	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	S ROJO, RAFAEL ROAD 19, INT. NO. 2 PUEBLO VIEJO, GUAYNABO P.R. 00966
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 appointment with an address.

SIGNATURE: *[Signature]* Feb. 12, 1998 (88) 781-0025

CR2E034 (10/97)