


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

**FILED**  
**Feb 24, 1999 8:00 am**  
**Secretary of State**

02-24-1999 90063 033 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 487993**

1. Corporation Name  
**YOURS TRULY, INCORPORATED**

Principal Place of Business 3785 N.W. 46TH STREET MIAMI FL 33142	Mailing Address 3785 N.W. 46TH STREET MIAMI FL 33142
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>4900 NW 29<sup>th</sup> Terrace</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>4100 NW 29<sup>th</sup> Terrace</b> Suite, Apt. #, etc.	4. FEI Number 59-1629830	Applied For Not Applicable
22 City & State 23 <b>Hollywood, Fl.</b>	27 City & State 28 <b>Hollywood, Fl.</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
24 Zip <b>33021</b>	29 Zip <b>33021</b>	8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>FREEMAN, ARNOLD</b> 3785 N.W. 46TH STREET MIAMI FL 33142	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code
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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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	ST FREEMAN, ARNOLD	1.1 TITLE	Freeman, Arnold
NAME	3710 SIMONS STREET	1.2 NAME	122 Laurel Rd
STREET ADDRESS	HOLLYWOOD FL 33021	1.3 STREET ADDRESS	Hollywood, Fl 33021
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	P BLOUNT, EDWARD J.	2.1 TITLE	
NAME	19424 N.E. 26TH AVE.#133	2.2 NAME	
STREET ADDRESS	N. MIAMI BEACH FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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, with all other like empowered.

SIGNATURE: \_\_\_\_\_ DATE: 1-11-99 DAYTIME PHONE #: 305 633 1815

CR2E034 (1/98)