

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

FILED

Mar 25 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 # 575001 (3)
 1. Corporation Name
ECOSHORES, INCORPORATED



Principal Place of Business 3881 SOUTH NOVA ROAD PT ORANGE FL 32127-4950	Mailing Address 3881 SOUTH NOVA ROAD PT ORANGE FL 32127-4950
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3869 S. NOVA Road #2 Suite, Apt. #, etc.		2a. Mailing Address 26 3869 S. NOVA Road #2 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/07/1978
22 City & State PORT ORANGE FL		27 City & State PORT ORANGE FL		4. FEI Number 59-1891242
23 Zip 32127		28 Zip 32127		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
25 Country		30 Country		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 BEEMAN, STEPHEN E 3881 S NOVA RD PT ORANGE, FL 32127		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 3869 S. NOVA Road #2 83 84 City PORT ORANGE FL 85 Zip Code 32127	
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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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VS	1.2 NAME	
STREET ADDRESS	BEEMAN, GRACEY R	1.3 STREET ADDRESS	3869 S. NOVA Road #2
CITY-ST-ZIP	3881 S. NOVA RD.	1.4 CITY-ST-ZIP	PORT ORANGE, FL 32127
	PT ORANGE, FL 00000 50		
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS	PT	2.3 STREET ADDRESS	3869 S. NOVA Road #2
CITY-ST-ZIP	BEEMAN, STEPHEN E	2.4 CITY-ST-ZIP	PORT ORANGE FL 32127
	3881 S. NOVA RD		
	PT ORANGE, FL 00000		
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: *[Signature]*

3/2/98

CR2E034 (10/97)