

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

FILED
Jan 15 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 # 594901 (1)

1. Corporation Name
1770 LAS OLAS CORPORATION



Principal Place of Business
**1915 NE 45 ST
 STE 105
 FT LAUDERDALE FL 33304
 US**

Mailing Address
**1915 NE 45 ST
 STE 105
 FT LAUDERDALE FL 33304
 US**

DO NOT WRITE IN THIS SPACE

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

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

3. Date Incorporated or Qualified
12/22/1978

4. F.I.T. Number
59-1926777

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
**HARRIS, J ROGER
 1216 SEMINOLE DR
 FT LAUDERDALE FL 33304**

10. Name and Address of New Registered Agent
 81 Name **SAME, % MANAGER**
 82 Street Address (P.O. Box Number is Not Acceptable)
840 OAKWOOD ST
 83
 84 City **CRESCENT CITY FL** 85 Zip Code **32112**

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]* DATE

12. OFFICERS AND DIRECTORS

TITLE	ST	<input checked="" type="checkbox"/> DELETE
NAME	AMY CLEMENTS	
STREET ADDRESS	1697 VELMA DR SOUTH	
CITY-ST-ZIP	LARGO FL 34640	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	GEORGE CLEMENTS	
STREET ADDRESS	1697 VELMA DR. SOUTH	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	DVPS	<input type="checkbox"/> DELETE
NAME	HARRIS, CAROL B.	
STREET ADDRESS	1216 SEMINOLE DRIVE	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HARRIS, ROGER J	
STREET ADDRESS	1915 NE 45TH #105	
CITY-ST-ZIP	FT LAUDERDALE FL	
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	VICE PRES, DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	R. DAVIDSON KELLER	
1.3 STREET ADDRESS	3785 ALT 19 NORTH	
1.4 CITY-ST-ZIP	PALM HARBOR FL 34683	
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	DIRECTOR, SEC. TREAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	CAROL B. HARRIS	
3.3 STREET ADDRESS	1216 SEMINOLE DR.	
3.4 CITY-ST-ZIP	FT. LAUDERDALE FL 33304	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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 on an attachment with an address

SIGNATURE *[Signature]* DATE **1/13/98 044 771,1919**

CR2E034 (10/97)