

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 JUL 22 AM 8:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 613625 (3)
1. Corporation Name
INSTA-DROP, INC.



Principal Place of Business
625 SE 5TH AVE
P.O. BOX 1429
MELROSE FL 32666
US

Mailing Address
625 SE 5TH AVE
P.O. BOX 1429
MELROSE FL 32666-5419
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address	
21	625 SE 5th Ave	26	625 SE 5th Ave
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23	Melrose, FL	28	Melrose, FL
Zip	Country	Zip	Country
24	32666	25	Bradford
29	32666	30	Bradford

3. Date Incorporated or Qualified	
03/16/1979	
4. FEI Number	Applied For
59-1898670	<input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
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		10. Name and Address of New Registered Agent	
C.B. ISAAC/MELROSE ACCOUNTING HIGHWAY 21 NORTH MELROSE FL 32666		81 Name Rom Gilbert, CPA	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		4210 NW 37th PL, Suite 300	
		83	
		84 City Gainesville	
		FL	
		85 Zip Code 32606	

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 Rom Gilbert ROM GILBERT, CPA DATE 7/13/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, JACK V	1.2 NAME	
STREET ADDRESS	625 SE 5TH AVE	1.3 STREET ADDRESS	000002598500--3
CITY-ST-ZIP	MELROSE FL	1.4 CITY-ST-ZIP	-07/24/98--01002--020
TITLE	ST	2.1 TITLE	***550.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMILEY, LINDA R.	2.2 NAME	
STREET ADDRESS	625 SE 5TH AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MELROSE FL	2.4 CITY-ST-ZIP	
TITLE		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		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		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		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.

CR2E034 (10/97)

July 13, 1988

**Florida Department of State
Sandra B. Mortham, Secretary of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, FL 32314**

Dear Ms. Mortham:

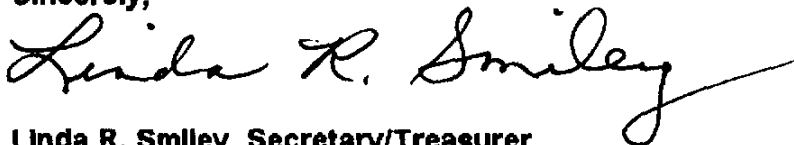
We apologize for the delay in returning this document. We were out of the State of Florida for three weeks and the post office held our mail until we returned to pick it up. This occurred during the holidays.

Mr. Rom Gilbert was unavailable when we returned which delayed his signature until today, he is our new Registered Agent and tax preparer.

Annual Report Section

Letter number: 998A00033069

Sincerely,

A handwritten signature in cursive script that reads "Linda R. Smiley". The signature is fluid and extends to the right with a long, sweeping underline.

**Linda R. Smiley, Secretary/Treasurer
Insta-Drop, Inc.
625 S.E. 5th Ave.
Melrose, FL 32666-5419
PH: 352-475-5000**