

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

FILED
Feb 13 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 # 625638 (2)
1. Corporation Name MALT IV, INCORPORATED



Principal Place of Business P O BOX 820 MONTREAT NC 28757	Mailing Address P O BOX 820 MONTREAT NC 28757
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 103 Prospect Street Suite, Apt. #, etc.		2a. Mailing Address 26 103 Prospect Street Suite, Apt. #, etc.		3. Date Incorporated or Qualified 06/01/1979	
22 City & State 23 Black Mountain, N.C.		27 City & State 28 Black Mountain, N.C.		4. FEI Number 59-1997554	
24 28711		25 USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 28711		30 USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. Name and Address of Current Registered Agent STEWART, WILLIAM J. 3355 OCEAN DR. VERO BEACH FL 32983				8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent STEWART, WILLIAM J. 3355 OCEAN DR. VERO BEACH FL 32983		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	STD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, PHIL D.	1.2 NAME	
STREET ADDRESS	118 MECKLENBURG CIR	1.3 STREET ADDRESS	
CITY-ST-ZIP	MONTREAT NC	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MORGAN, ANNIE LAURIE	2.2 NAME	
STREET ADDRESS	118 MECKLENBURG CIR 103 Prospect St	2.3 STREET ADDRESS	
CITY-ST-ZIP	MONTREAT NC Black Mountain, N.C.	2.4 CITY-ST-ZIP	
TITLE	Allen L. Morgan <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2133 Webster Street	3.2 NAME	
STREET ADDRESS	Palo Alto, Ca. 94301	3.3 STREET ADDRESS	
CITY-ST-ZIP	Vice President	3.4 CITY-ST-ZIP	
TITLE	Randolph Tyler Morgan <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8635 Menteith Terrace	4.2 NAME	
STREET ADDRESS	Miami Lakes, Fl. 33016	4.3 STREET ADDRESS	
CITY-ST-ZIP	Secretary/Treasurer	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 Annie Laurie Morgan Date 2-13-98

CR2E034 (10/97)