

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

FILED

Apr 14 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 # **646426** (7)
1. Corporation Name
TEAM INTRAWORLD MARKET COMPANY, INC.

Principal Place of Business
**P.O. BOX 968
CRESCENT CITY FL 32112**

Mailing Address
**P.O. BOX 968
CRESCENT CITY FL 32112**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/03/1979	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1954821	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24	Country	29	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	

g. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
NEWBOLD, JOHN R. JR. RT. 2 BOX 105 (OLD HWY 17) CRESCENT CITY FL 32112		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

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	NAME	1.1 TITLE	1.2 NAME
NAME	STREET ADDRESS	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	2.2 NAME
PD AUSTIN, JACK 17725 WILLIS V MCCALL RD UMATILLA FL		2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
TITLE	NAME	3.1 TITLE	3.2 NAME
NAME	STREET ADDRESS	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
CITY - ST - ZIP	<input type="checkbox"/> DELETE	4.1 TITLE	4.2 NAME
STD NEWBOLD, JOHN R. JR. RT 2 BOX 105 OLD HWY 17 CRESCENT CITY FL		4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
TITLE	NAME	5.1 TITLE	5.2 NAME
NAME	STREET ADDRESS	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
CITY - ST - ZIP	<input type="checkbox"/> DELETE	6.1 TITLE	6.2 NAME
D AUSTIN, KRAMER 17725 WILLIS V MCCALL RD UMATILLA FL 32784		6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
TITLE	NAME	7.1 TITLE	
NAME	STREET ADDRESS	7.2 NAME	
CITY - ST - ZIP	<input type="checkbox"/> DELETE	7.3 STREET ADDRESS	
D NEWBOLD, JOHN R. III RT 2 BOX 72 HWY 17 CRESCENT CITY FL 32112		7.4 CITY - ST - ZIP	
TITLE	NAME	8.1 TITLE	
NAME	STREET ADDRESS	8.2 NAME	
CITY - ST - ZIP	<input type="checkbox"/> DELETE	8.3 STREET ADDRESS	
S NEWBOLD, JOHN R. JR. RT 2 BOX 105 OLD HWY 17 CRESCENT CITY FL 32112		8.4 CITY - ST - ZIP	
TITLE	NAME	9.1 TITLE	
NAME	STREET ADDRESS	9.2 NAME	
CITY - ST - ZIP	<input type="checkbox"/> DELETE	9.3 STREET ADDRESS	
S JACQUELINE M. NEWBOLD RT 2 BOX 105 OLD HWY 17 CRESCENT CITY FL 32112		9.4 CITY - ST - ZIP	
TITLE	NAME	10.1 TITLE	
NAME	STREET ADDRESS	10.2 NAME	
CITY - ST - ZIP	<input type="checkbox"/> DELETE	10.3 STREET ADDRESS	
D LINDA T. AUSTIN 17725 WILLIS V MCCALL RD UMATILLA FL 32784		10.4 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: Jacqueline M. Newbold, Sec. & Dir. Date: 4-8-98 Filing Fee: 9046284674

CR2E034 (10/97)