

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

FILED  
Apr 27 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 # 846055 (2)  
1. Corporation Name  
S.S. MELBOURNE, INC.

Principal Place of Business  
6100 GLADES RD., SUITE 205  
BOCA RATON FL 33434

Mailing Address  
6100 GLADES RD., SUITE 205  
BOCA RATON FL 33434

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1280 W. PALMETTO PARK RD. Suite, Apt., etc. Suite 209 City & State BOCA RATON, FL Zip 33433 Country PBC		2a. Mailing Address 26 1280 W. PALMETTO PARK RD. Suite, Apt., etc. Suite 209 City & State BOCA RATON, FL Zip 33433 Country PBC		3. Date Incorporated or Qualified 05/22/1980	
4. FEI Number 38-2289664		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		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			

6. Name and Address of Current Registered Agent TOOMEY, PAUL D. 6100 GLADES RD. SUITE 205 BOCA RATON FL 33434		10. Name and Address of New Registered Agent 81 Name Richard L. Davis 82 Street Address (P.O. Box Number is Not Acceptable) 7280 W. PALMETTO PARK RD. Suite 209 83 City BOCA RATON FL 85 Zip Code 33433	
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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  Richard L. Davis 4/21/98  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, RICHARD L.	1.2 NAME	
STREET ADDRESS	6100 GLADES ROAD	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TOOMEY, PAUL D.	2.2 NAME	
STREET ADDRESS	6100 GLADES ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	AS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KICKHAM, EDWARD F.	3.2 NAME	
STREET ADDRESS	6100 GLADES ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	3.4 CITY-ST-ZIP	
TITLE	AS	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FOLTYN, DAVID	4.2 NAME	
STREET ADDRESS	6100 GLADES ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	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.

SIGNATURE:  4/21/98 561-395-7559

CR2E034 (10/97)