

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

FILED

Apr 18 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F09970 (7)
1. Corporation Name
BUY TODAY, INC.



Principal Place of Business P.O. BOX 24435 FT LAUDERDALE FL 33307	Mailing Address P.O. BOX 24435 FT LAUDERDALE FL 33307-4435
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/29/1980	3a. Date of Last Report 05/01/1996
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 59-2042772	Applied For Not Applicable
22 City & State	27	29 City & State	30	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

GEORGE, MAY
5790 WHIRLWAY ROAD
PALM BCH GARDENS FL 33418

81 Name George May
82 Street Address (P.O. Box Number is Not Acceptable)
83 2840 Foxhall Dr. E.
84 City W. Palm Bch. FL 85 Zip Code 33417

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 _____ DATE 1-9-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PVS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE, MAY	1.2 NAME	George May
STREET ADDRESS	5790 WHIRLWAY ROAD	1.3 STREET ADDRESS	2840 Foxhall Dr. E.
CITY-ST-ZIP	PALM BCH GARDENS FL	1.4 CITY-ST-ZIP	W. Palm Bch. FL 33417
TITLE	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEORGE, MAY	2.2 NAME	George May
STREET ADDRESS	5790 WHIRLWAY ROAD	2.3 STREET ADDRESS	2840 Foxhall Dr. E.
CITY-ST-ZIP	PALM BCH GARDENS FL	2.4 CITY-ST-ZIP	W. Palm Bch. FL 33417
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<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 do 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 _____ DATE 1-9-97

CR2E034 (9/96)