

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

FILED

**Feb 25 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 # F94000003368 (7)
1. Corporation Name
A.B. OPERATIONS, INC.



Principal Place of Business 1900 INTERNATIONAL PARK DR. SUITE 303 BIRMINGHAM AL 35234	Mailing Address 1900 INTERNATIONAL PARK DR. SUITE 303 BIRMINGHAM AL 35234
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Country	30 Zip

3. Date Incorporated or Qualified 06/27/1994	
4. FEI Number 63-1106129	Applied For <input type="checkbox"/> 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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324**

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

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

TITLE	C <input type="checkbox"/> DELETE
NAME	FITZPATRICK, KEVIN P
STREET ADDRESS	1 CHASE MANHATTAN PLAZA
CITY-ST-ZIP	NEW YORK NY 10270
TITLE	D <input type="checkbox"/> DELETE
NAME	KLEINMAN, GARY
STREET ADDRESS	1 CHASE MANHATTAN PLAZA
CITY-ST-ZIP	NEW YORK NY 10270
TITLE	DP <input type="checkbox"/> DELETE
NAME	BAKER, ALEX D
STREET ADDRESS	1900 INTERNATIONAL PARK DR #303
CITY-ST-ZIP	BIRMINGHAM AL
TITLE	DV <input type="checkbox"/> DELETE
NAME	PRICE, JEFFREY
STREET ADDRESS	1 CHASE MANHATTAN PLAZA
CITY-ST-ZIP	NEW YORK NY 10270
TITLE	S <input type="checkbox"/> DELETE
NAME	TUCK, ELIZABETH M
STREET ADDRESS	1 CHASE MANHATTAN PLAZA
CITY-ST-ZIP	NEW YORK NY 10270
TITLE	AS <input type="checkbox"/> DELETE
NAME	CARLSON, RONALD L
STREET ADDRESS	1900 INTERNATIONAL PARK DR #303
CITY-ST-ZIP	BIRMINGHAM AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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, trustee or 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 _____ *Kevin P. Fitzpatrick* **1300 1900 305-9169-1001**

CR2E034 (10/97)