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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY+ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000002355 (4)

FIRST AMERICAN NATIONAL CAPITAL CORP.

Principal Place of Business Mailing Address C/O PAUL SORBERA C/O PAUL SORBERA 453 MILTON ROAD 453 MILTON ROAD DO NOT WRITE IN THIS SPACE **RYE NY 10580** RYE NY 10580 3. Date Incorporated or Qualified 05/15/1995 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 13-3679658 26 Not Applicable 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Zıp Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BARROW, CHARLES 14720 CLARENDON DRIVE Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33624** 83 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** Signature, typed or printed name of registered agent and title d applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE PCST TITLE 1.1 TITLE SORBERA, PAUL NAME 1.2 NAME 453 MILTON ROAD STREET ADDRESS 1.3 STREET ADORESS RYE NY 10580 1.4 City - ST- 7IP CITY-ST-ZIP Addition DELETE 2.1 TITLE Change TITLE **SORBERA. PAUL** 2.2 NAME NAME 453 MILTON ROAD STREET ADDRESS 2.3 STREET ADORESS **RYE NY 10580** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-St-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE

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 chanc u, or an all achieves that an address.

5.2 NAME

6.1 TITLE

6.2 NAME

□ DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

Ulanles 01/2-520

Change

Addition

FILED

Apr 24 1998 8:00am

Secretary of State