


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

FILED

Jan 29 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # F96000002425 (4) 1. Corporation Name WEBCO SERVICES, INC.	



Principal Place of Business 31W339 SCHOGER RD.. BLDG B NAPERVILLE IL 60564	Mailing Address 31W339 SCHOGER RD.. BLDG B NAPERVILLE IL 60564
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 131 Kirkland Cir. Suite, Apt. #, etc.		2a. Mailing Address 26 PO BOX 306 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 05/13/1996	
22 City & State 23 Oswego IL		27 City & State 28 Lutz FL		4. FEI Number 36-4023828 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 Zip 60543		29 Zip 33548		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 Country		30 Country		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 PERREAULT, SHANE 7808 CLUBHOUSE ESTATES DR. ORLANDO FL 32819		10. Name and Address of New Registered Agent 81 Name James Viereck 82 Street Address (P.O. Box Number is Not Acceptable) 83 18107 Peregrines Perch 84 City Lutz FL 85 Zip Code 33549	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 *James Viereck* DATE 1/13/98
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	PCD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBSTER, RICHARD	1.2 NAME	
STREET ADDRESS	14213 MINTICELLO	1.3 STREET ADDRESS	
CITY-ST-ZIP	PLAINFIELD IL	1.4 CITY-ST-ZIP	
TITLE	TS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBSTER, SANDRA	2.2 NAME	
STREET ADDRESS	14213 MONTICELLO	2.3 STREET ADDRESS	
CITY-ST-ZIP	PLAINFIELD IL	2.4 CITY-ST-ZIP	
TITLE	ST	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBSTER, MICHAEL	3.2 NAME	
STREET ADDRESS	3606 HENNEPIN	3.3 STREET ADDRESS	
CITY-ST-ZIP	JOILET IL	3.4 CITY-ST-ZIP	
TITLE		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		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: *Richard Webster* PRES. 1-13-98

CR2E034 (10/97)