SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F98000001828

AMERICAN VIATICAL CORPORATION

FILED Jul 15, 1999 8:00 am Secretary of State

07-15-1999 90002 040 ***150.00



Principal Place	of Business	Mailing Address			
6000 B SAWGRASS VILLAGE CIRCLE 6000 B SAWGRASS VILL			E CIRCLE	1	
PONTE VEDRA BEACH FL 32062		PONTE VEDRA BEACH FL 32082		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				03/31/1998	
2. Principal Pl	ace of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For
21814 Hwy AIA 26 814 Hwy			AIA	58-2351286	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22 30 3	J	27 302		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Ponte	Vedra Beach FL	28 Ponte Vedra	r Beach, F	Trust Fund Contribution	Added to Fees
一 ^{Zip} っっ.	Country	Zip	Country	8. This corporation owes the curre	
24 ろより) 8 L 25		30	Intangible Personal Property.	Yes No
	9. Name and Address of Currer	t Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
FLOF	RIDA STATE INSURANCE COMM	IISSIONER	oi Name	16	
	CAPITAL BLDG.	NOIOITEIT	82 Street A	ddress (P.O. Box Number is Not Acceptab	ole)
	AHASSEE FL 32399		83		
17 122	AIAOOLL I E OLOUD		63		
			84 City		85 Zip Code
					FL T S S S S S S S S S
11. Pursuant	to the provisions of sections 607.050	2 and 607.1508, Florida Statutes of Florida. Such change was a	s, the above-named cor uthorized by the corpor	rporation submits this statement for the pur ration's board of directors, I hereby accept	rpose of changing its registered the appointment as registered
office or r			- de Orestado	· ·	• •
office or r	nm familiar with, and accept the oblig	ations of, section 607.0505, Flo	rida Statutes.		
office or r agent. I a SIGNATURE _	nm familiar with, and accept the oblig	ations of, section 607.0505, Flo			DATE
office or r agent. I a SIGNATURE _	am familiar with, and accept the oblig	ations of, section 607.0505, Flo	TE: Registered Agent signature		DATE ICERS AND DIRECTORS IN 12
office or r agent. I a SIGNATURE _	am familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AN	ations of, section 607.0505, Flor and title if applicable. (NO ID DIRECTORS	TE: Registered Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
office or ragent. I a SIGNATURE	am familiar with, and accept the oblig Signature, typed or printed name of registered ages OFFICERS AN	ations of, section 607.0505, Flo	TE: Registered Agent signature		ICERS AND DIRECTORS IN 12 Change Addition
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in Block 12 or Block 13 if changed of on an attachment with an address.

SIGNATURE:



July 8, 1999

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re: Document #F98000001828

To Whom It May Concern:

We are in receipt of the 2nd Notice for the 1999 Profit Corporation Annual Report, however, we did not receive the 1st Notice. I called and spoke with one of your representatives today at (850)488-900 and she told me to send in a letter with a \$150.00 check.

Our address changed in November 1998 to:

American Viatical Corporation 814 Highway A1A Suite 302 Ponte Vedra Beach, FL 32082

Derri D. Morris

If you need any additional information, please do not hesitate to call me at (904)285-8900.

Sincerely,

Terri D. Morris Controller

Enclosures