

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

FILED
May 04 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 # G21864 (5)
1. Corporation Name
ANTARAMIAN DEVELOPMENT CORP.



Principal Place of Business Mailing Address
405 FIFTH AVE. S.
#6
NAPLES FL 33940
405 FIFTH AVE. S.
#6
NAPLES FL 33940

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 365 5th AVE S		26 365 5th AVE S		02/04/1983	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 201		27 201		59-2276961	
City & State		City & State		Applied For	
23 NAPLES, FL		28 NAPLES, FL		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24 34102		29 34102		<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25 USA		30 USA		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

ANTARAMIAN, JACK
405 FIFTH AVE. S. #6
NAPLES FL 33940

10. Name and Address of New Registered Agent

81 Name
82 Street Address (Post Box Number is Not Acceptable)
365 5th AVE S #201
83
84 City
NAPLES
85 Zip Code
FL 34102

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 if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	1.1 TITLE	
NAME	ANTARAMIAN, JACK J.	1.2 NAME	
STREET ADDRESS	3725 FORT CHARLES DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	
NAME	WEINSTEIN, ROBERT W.	2.2 NAME	
STREET ADDRESS	125 SUMMER ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOSTON MA	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	Thomas, Charles J	3.2 NAME	
STREET ADDRESS	1329 San Marcos Blvd.	3.3 STREET ADDRESS	
CITY-ST-ZIP	Naples, FL 33942	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	Frazitta, Robert M.	4.2 NAME	
STREET ADDRESS	177 Worcester St.	4.3 STREET ADDRESS	
CITY-ST-ZIP	Wellesley, MA	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
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 biennial 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 recorder or recorder 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 to this address.

SIGNATURE *[Signature]* 11/22/98 G21864-001

CR2E034 (10/97)