

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 23 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 # G93744 (2)			
1. Corporation Name FOCUS GRAPHICS, INC.			
Principal Place of Business % MIKE S BUCKNER 777 S FLAGLER DR., 1900 PHILLIPS PT W W PALM BEACH FL 33401-3198		Mailing Address % MIKE S BUCKNER 777 S FLAGLER DR., 1900 PHILLIPS PT W W PALM BEACH FL 33401-3198	
2. Principal Place of Business 21 223 PERUVIAN AVE Suite, Apt. #, etc. 22 City & State 23 Palm Beach, Fla Zip 24 33480 Country 25 USA		2a. Mailing Address 26 223 PERUVIAN AVE Suite, Apt. #, etc. 27 City & State 28 Palm Beach, Fla Zip 29 33480 Country 30 USA	
9. Name and Address of Current Registered Agent BUCKNER, MIKE, S 1900 PHILLIPS PT WEST 777 S FLAGLER DR W PALM BEACH FL 33401		10. Name and Address of New Registered Agent 81 Name PETER S. BRODIE 82 Street Address (P.O. Box Number is Not Acceptable) 223 PERUVIAN AVE 83 84 City Palm Beach FL 85 Zip Code 33480	
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 willing to accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE [Signature] (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS TITLE P HARRISON, JACK <input checked="" type="checkbox"/> DELETE NAME STREET ADDRESS 271 OLD MEADOW WAY CITY-ST-ZIP PALM BEACH GARDENS FL		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME PETER S. BRODIE 1.3 STREET ADDRESS 223 PERUVIAN AVE 1.4 CITY-ST-ZIP Palm Beach, Fla 33480	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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	
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS 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 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 [Signature] (NOTE: Registered Agent signature required when reinstating)			



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/29/1984	
4. FEI Number 59-2383860	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	

CR2E034 (5/98)