

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

FILED
Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H83508 (2)
1. Corporation Name
SELF DEFENSE ENTERPRISES, INC.



Principal Place of Business 23114 SANDALFOOT PLAZA DR BOCA RATON FL 33428 US	Mailing Address 23114 SANDALFOOT PLAZA DR BOCA RATON FL 33428 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 21000 Boca Rio Road Suite, Apt. #, etc. 22 Suite A-16 City & State 23 Boca Raton, FL Zip 24 33433		2a. Mailing Address 26 21000 Boca Rio Road Suite, Apt. #, etc. 27 Suite A-16 City & State 28 Boca Raton, FL Zip 29 33433		3. Date Incorporated or Qualified 10/31/1985	4. FEI Number 59-2586182 Applied For <input type="checkbox"/> Not Applicable
25 Palm Beach		30 Palm Beach		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
25 Palm Beach		30 Palm Beach		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

TILLOTSON, RICHARD, RAINES
5851 HOLMBERG RD APT 425
PARKLAND FL 33067

10. Name and Address of New Registered Agent

81 Name Richard R. Tillotson
82 Street Address (P.O. Box Number is Not Acceptable) 21000 Boca Rio Road
83 Suite Suite A-16
84 City Boca Raton
85 Zip Code FL 33433

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

Richard Tillotson
Signature, typed or printed name of registered agent and true if applicable

Richard Tillotson, President

4/21/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME TILLOTSON, RICHARD		1.2 NAME Richard Tillotson	
STREET ADDRESS 5851 HOLMBERG RD APT 425		1.3 STREET ADDRESS 21000 Boca Rio Road, Suite A-16	
CITY-ST-ZIP PARKLAND FL		1.4 CITY-ST-ZIP Boca Raton, FL 33433	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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 Tillotson
Signature, typed or printed name of registered agent and true if applicable

Richard Tillotson 4/21/98

(561)488-5877

CR2E034 (10/97)