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

SIGNATURE:

Mar 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Socretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J12080 (4)THAMES ENTERPRISES, INC. Mailing Address Principal Place of Business 1450 W. KING ST. 1450 W. KING ST. COCOA FL 32922 COCOA FL 32922 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/30/1986 2a. Mailing Address 2. Principal Place of Business Applied For 59-2672748 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B1 Name THAMES, GLORIA 1450 W. KING ST. Street Address (P.O. Box Number is Not Acceptable) COOCA FL 32922 83 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 if am lapsific with, and accept the objection 607.0505, Florida Statutes. Grende SIGNATURE vhen reinstalling) 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition THAMES, GLORIA 1.2 NAME NAME STREET ADDRESS 2727 N WICKHAM RD #7-201 1.3 STREET ADDRESS MELBOURNE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE 22 NAME NAME STREET ADDRESS 23 STREET ADDRESS CITY - ST - ZIP 2 4 CITY-ST-ZIP Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIF TETLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6 3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thoreby 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 of on an attachment with an address.

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March 9, 1998 (407