

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

FILED
May 21 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 # **J51148** (1)
1. Corporation Name
CORBEL & CO.

Principal Place of Business P. O. BOX 47470 JACKSONVILLE FL 32247	Mailing Address P. O. BOX 47470 JACKSONVILLE FL 32247
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/09/1986	
				4. FEI Number 59-2503866	
				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	

9. Name and Address of Current Registered Agent VERRE, DAVID 1660 PRUDENTIAL DR JACKSONVILLE FL 32207		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	V <input type="checkbox"/> DELETE	1.1 TITLE	P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOFFMAN, CRAIG	1.2 NAME	MACKANOS, DONALD
STREET ADDRESS	1660 PRUDENTIAL DRIVE	1.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP	JACKSONVILLE FL	1.4 CITY-ST-ZIP	JACKSONVILLE FL
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	C <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, JAMES E	2.2 NAME	DOWD, PHILIP
STREET ADDRESS	1660 PRUDENTIAL DR	2.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP	JACKSONVILLE FL	2.4 CITY-ST-ZIP	JACKSONVILLE FL
TITLE	VSD <input type="checkbox"/> DELETE	3.1 TITLE	M <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MACKANOS, DONALD	3.2 NAME	DAVIS, RAY
STREET ADDRESS	1660 PRUDENTIAL DRIVE	3.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP	JACKSONVILLE FL	3.4 CITY-ST-ZIP	JACKSONVILLE FL
TITLE	T <input type="checkbox"/> DELETE	4.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VERRE, DAVID	4.2 NAME	BRONSTEIN, ANDREW
STREET ADDRESS	1660 PRUDENTIAL DRIVE	4.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP	JACKSONVILLE FL 32207	4.4 CITY-ST-ZIP	JACKSONVILLE FL
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	V/S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	GROSS, LAWRENCE
STREET ADDRESS		5.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	JACKSONVILLE FL
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	RUANE, MICHAEL
STREET ADDRESS		6.3 STREET ADDRESS	1660 PRUDENTIAL DRIVE
CITY-ST-ZIP		6.4 CITY-ST-ZIP	JACKSONVILLE FL

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

CR2E034 (10/97)