

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

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Apr 09 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 # J67009 (7)  
1. Corporation Name  
MANHATTAN SOUTH, INC.

Principal Place of Business 25 SOUTH 2ND ST JACKSONVILLE BCH. FL 32250 US	Mailing Address 1301 S 1ST ST S SUITE 702 JACKSONVILLE FL 32250
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 234 PRINDLE DRIVE EAST Suite, Apt. #, etc. 22 City & State JACKSONVILLE, FL 23 Zip 32225 24 Country U.S.		2a. Mailing Address 25 P.O. Box 51327 Suite, Apt. #, etc. 26 City & State JACKSONVILLE BEACH, FL 27 Zip 32240-1327 28 Country U.S.		3. Date Incorporated or Qualified 04/06/1987	
		4. FEI Number 59-3051277		Applied For Not Applicable	
		5. Certificate of Status Desired <input checked="" 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 checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent SAMMARCO, KATHLEEN A 1301 S 1ST ST., #702 JACKSONVILLE BCH. FL 32250		10. Name and Address of New Registered Agent 81 Name KATHLEEN A. SAMMARCO 82 Street Address (P.O. Box Number is Not Acceptable) 234 PRINDLE DRIVE EAST 83 84 City JACKSONVILLE FL 85 Zip Code 32225	
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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  KATHLEEN A. SAMMARCO - PRESIDENT DATE 4-1-98  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P SAMMARCO, KATHLEEN A 1301 S 1ST ST., #702 JACKSONVILLE BCH. FL	1.1 TITLE	P KATHLEEN A. SAMMARCO
NAME		1.2 NAME	234 PRINDLE DRIVE EAST
STREET ADDRESS		1.3 STREET ADDRESS	JACKSONVILLE, FL 32225
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D SAMMARCO, THOMAS J. 1301 S 1ST ST #702 JACKSONVILLE BCH FL	2.1 TITLE	D STOCKHOLDER
NAME		2.2 NAME	THOMAS J. SAMMARCO
STREET ADDRESS		2.3 STREET ADDRESS	234 PRINDLE DRIVE EAST
CITY-ST-ZIP		2.4 CITY-ST-ZIP	JACKSONVILLE, FL 32225
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		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 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:  KATHLEEN A. SAMMARCO - PRESIDENT DATE 4-1-98

CR2E034 (10/97)