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

PROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 28 1998 8:00am
Secretary of State

DOCUMENT # K13579   (3)

1. Corporation Name

HIDDEN LAKES ESTATES, INC.

Principal Place of Business

~~P.O. BOX 1417~~
P O BOX 1417
COCOA BEACH FL 32932
US

Mailing Address

~~P.O. BOX 1417~~
P O BOX 1417
COCOA BEACH FL 32932
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	**02/02/1988**	
4. FEI Number **59-2954649**		Applied For / Not Applicable

2. Principal Place of Business	21	
Suite, Apt #, etc.	22 **P.O. Box 1417**	
City & State	23 **Cocoa Beach, FL**	
Zip 24 **32932**	25 Country **USA**	

2a. Mailing Address	26	
Suite, Apt #, etc.	27 **P.O. Box 1417**	
City & State	28 **Cocoa Beach, FL**	
Zip 29 **32923**	30 Country **USA**	

5. Certificate of Status Desired [X]   **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ]   **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [ ] Yes [ ] No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MOEHLE, CHARLES F. 65 COUNTRY CLUB ROAD COCOA BEACH FL 32931	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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)   _(NEW Registered Agent signature required when reinstating)_   DATE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE **PSTD**		[ ] DELETE	1.1 TITLE		[ ] Change [ ] Addition
NAME **MOEHLE, CHARLES F.**			1.2 NAME		
STREET ADDRESS **65 COUNTRY CLUB DR**			1.3 STREET ADDRESS		
CITY-ST-ZIP **COCOA BEACH FL**			1.4 CITY-ST-ZIP		
TITLE		[ ] DELETE	2.1 TITLE		[ ] Change [ ] Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		[ ] DELETE	3.1 TITLE		[ ] Change [ ] Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		[ ] DELETE	4.1 TITLE		[ ] Change [ ] Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		[ ] DELETE	5.1 TITLE		[ ] Change [ ] Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		[ ] DELETE	6.1 TITLE		[ ] Change [ ] Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

500002544185
-06/02/98--01031--029
***317.50

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: Charles F. Moehle 4/18/98