

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

FILED

Feb 24 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 # **K42250** (6)
1. Corporation Name
OPUS BOARDS, INC.

Principal Place of Business 505 NORTH ORLANDO AVE. P.O. BOX 820757 COCOA BEACH FL 32932-0757	Mailing Address 505 NORTH ORLANDO AVE. P.O. BOX 320257 COCOA BEACH FL 32932-0757
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 180 Pinellas Ln #101 Suite, Apt. #, etc. #101 City & State Cocoa Beach FL Zip 32931 Country USA		2a. Mailing Address 26 180 Pinellas Ln #101 Suite, Apt. #, etc. City & State Cocoa Beach FL Zip 32931 Country USA		3. Date Incorporated or Qualified 10/31/1988	
22 #101		27		4. FEI Number 65-0087371	
23 Cocoa Beach FL		28 Cocoa Beach FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 32931		29 32931		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25 USA		30 USA		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 SUNDIN, GLENN T. 653 BREVARD AVENUE COCOA FL 32922		10. Name and Address of New Registered Agent 81 Name Glenn Sundin 82 Street Address (P.O. Box Number is Not Acceptable) 335 S. Plumosa Ave #A 83 84 City Merritt Island FL 85 Zip Code 32952	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	STREET ADDRESS	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
CITY - ST - ZIP	CITY - ST - ZIP	2.1 TITLE	2.2 NAME
		2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
		3.1 TITLE	3.2 NAME
		3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
		5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	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: 

2/19/98 407-784-2318

CR2E034 (10/97)