


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

FILED
Mar 16 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 # K53119 (9)
 1. Corporation Name
SARABAY CENTER, INC.



Principal Place of Business 310 PEARL AVENUE SARASOTA FL 34243	Mailing Address 310 PEARL AVENUE SARASOTA FL 34243
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc.	2a. Mailing Address 26 4337 Hamlin Way
22 City & State	27 Wimauma, FL
23 Zip	28 33578
24 Country	29 US

3. Date Incorporated or Qualified 12/06/1988
4. FEI Number 65-0084218
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
BODDEN, REBECCA S
220 PEARL AVE
SARASOTA FL 34243

10. Name and Address of New Registered Agent

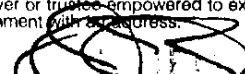
81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 4337 Hamlin Way
83 City Wimauma
84 State FL
85 Zip Code 33578

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	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	P EMRICK, BERT R	1.2 NAME	Emrick, Bert R
STREET ADDRESS	310 PEARL AVENUE	1.3 STREET ADDRESS	4337 Hamlin Way
CITY-ST-ZIP	SARASOTA FL	1.4 CITY-ST-ZIP	Wimauma, FL 33578
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	V EMRICK, JULIE	2.2 NAME	Emrick, Julie
STREET ADDRESS	310 PEARL AVENUE	2.3 STREET ADDRESS	4337 Hamlin Way
CITY-ST-ZIP	SARASOTA FL	2.4 CITY-ST-ZIP	Wimauma, FL 33578
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	T BODDEN, JOHN A	3.2 NAME	Bodden, John A
STREET ADDRESS	220 PEARL AVE	3.3 STREET ADDRESS	3003 Sweet Orange Dr.
CITY-ST-ZIP	SARASOTA FL	3.4 CITY-ST-ZIP	Wimauma, FL
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S BODDEN, REBECCA S	4.2 NAME	Bodden, Rebecca S.
STREET ADDRESS	220 PEARL AVE	4.3 STREET ADDRESS	3003 Sweet Orange Dr.
CITY-ST-ZIP	SARASOTA FL	4.4 CITY-ST-ZIP	Wimauma, FL
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 address.

SIGNATURE:  **3/10/98 813-624-2395**

CFR2034 (10/97)