FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 14 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # K59153 (2) CORPORATE ENTERPRISES, INC. Principal Place of Business Mailing Address 4100 CORPORATE SOUARE 4100 CORPORATE SOUARE NAPLES FL 34104 NAPLES FL 34104 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/18/1989 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0093088 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DYNICE, CHERYL 4100 CORPORATE SQUARE 82 Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 34104 83 Zip Code 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) one of registered attent profittle if applications OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DFLETE Addition TITLE 1.1 TITLE Change AMRHEIN, ADOLF 1.2 NAME **4100 CORPORATE SQUARE** STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 34104 CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE Change Addition 2.1 TITLE DYVICE CHERYL NAME DYNICE, CHERYL 2.2 NAME 4100 CORPORATE SQUEE 4100 CORPORATE SQUARE STREET ADDRESS 23 STREET ADDRESS NAPLES FL 34104 NAPLES / FL CITY-ST-ZIP 2.4 CITY+ST-ZIP DELETE Change Addition TITLE 3.1 TITLE MAME AMRHEIN DELETE 3.2 NAME DELETE 4100 CORPORATE SQUARE STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE DELETE (ENTERED ALREADY)
IN BOX 2 ABOVE DYNICE, CHERYL 4.2 NAME NAME DELETE 4100 CORPORATE SQUARE STREET ADDRESS 4.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information supplied with this fiting 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. heryl R. Dunice 3/12/98 (941) 643-6444 CHERYL L. DYNICE SIGNATURE:

DELETE

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

Change

Addition

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME