PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

APOLLO BEACH FL 33570

FILED Jul 12, 1999 8:00 am Secretary of State

07-12-1999 90021 040 ***550.00

COUVIEN F K76863 631 PARK PLACE, INC.								
ncipal Place of	Business	Mailing Address				- 1 MARIOTIN BUT (MAIN DING) JANES DITTO 1911 ATOM BEDIT GIGIN ATOM BURIT GEDI. 1961		
KINGSTON C OLLO BEACH	= -	725 KINGSTON COURT APOLLO BEACH FL 33572				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
						03/31/1989		
Principal Place of Business		2a. Mailing Address				4. FEI Number Applied For		
		26				59-2943306 Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5,00 May Be Added to Fees		
Zip	Country 25	Zip	Cou	ntry		8. This corporation owes the current year Intangible Personal Property. Yes No		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent		
TEVTE	D HADI EIGH A			81	Name			
Texter, Harleigh A. 725 Kingston Ct.				82	Street Address (P.O. Box Number is Not Acceptable)			

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.

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GNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE:	Registered Agent stocatu	re required when reinstating)	DATE
.,	OFFICERS AND DIRECTORS	3.0.0	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
E		DELETE	1.1 TITLE		Change Addition
Æ	TEXTER, HARLEIGH A.		1.2 NAME		
EET ADDRESS	725 KINGSTON CT.		1.3 STREET ADDRESS		
r-ST-ZIP	APOLLO BEACH FL		1.4 CITY-ST-ZIP		
E .		DELETE	2.1 TITLE		Change Addition
AE	TEXTER, BARBARA U.		2.2 NAME		
EET ADDRESS	725 KINGSTON CT.		2.3 STREET ADDRESS		
Y-ST-ZIP	APOLLO BEACH FL		2.4 CITY-ST-ZIP		
E		DELETE	3.1 TITLE		Change Addition
AE			3.2 NAME		
EET ADDRESS			3.3 STREET ADDRESS	·	
/-ST-ZIP	·		3.4 CITY-ST-ZIP		
.E		DELETE	4.1 TITLE		Change Addition
E			4.2 NAME		
EET ADORESS			4.3 STREET ADDRESS		
Y-ST-ZIP			4.4 CITY-ST-ZIP		
.E		DELETE	5.1 TITLE		Change Addition
AE			5.2 NAME		
EET ADORESS			5.3 STREET ADDRESS		
Y-ST-ZIP			5.4 CITY-ST-ZIP		
.E		DEFELE	6.1 TITLE		Change Addition
1E , -	等等 有 要的的第三人称		6.2 NAME		
EET ADDRESS			6.3 STREET ADDRESS		
<-ST-ZIP			6.4 CITY-ST-ZIP		· ·

I hereby certify that the information supplied with this filling 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, oppon an attachment with an address.

IGNATURE:

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Zip Code