

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Sep 11 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **K90093** (1)
1. Corporation Name
A+ PRIME PUMPS, INC.

Principal Place of Business
**8703 CLEARY BLVD
PLANTATION FL 33324
US**

Mailing Address
**PO BOX 16925
PLANTATION FL 33317
US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 6310 Gauntlet Hall Lane Suite, Apt. #, etc. 22		2a. Mailing Address 26 PO Box 16925 Suite, Apt. #, etc. 27		3. Date Incorporated or Qualified 05/23/1989		3a. Date of Last Report 07/30/1996	
23 Davie, FL City & State Zip 33331 Country USA		28 Plantation, FL City & State Zip 33318 Country USA		4. FEI Number 65-0131445		Applied For <input type="checkbox"/> Not Applicable	
24 33331		25 USA		29 33318		30 USA	

9. Name and Address of Current Registered Agent LASHLEY, LYNN 8703 CLEARY BLVD. PLANTATION FL 33324				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
85 Zip Code				FL			

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12:			
TITLE	D	<input checked="" type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LASHLEY, LYNN			1.2 NAME	Lashley Lynn		
STREET ADDRESS	8703 CLEARY BLVD			1.3 STREET ADDRESS	6310 Gauntlet Hall Lane		
CITY-ST-ZIP	PLANTATION FL			1.4 CITY-ST-ZIP	Davie, FL 33331		
TITLE	D	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LASHLEY, ANGEL			2.2 NAME	Lashley Angel		
STREET ADDRESS	8703 CLEARY BLVD			2.3 STREET ADDRESS	6310 Gauntlet Hall Lane		
CITY-ST-ZIP	PLANTATION FL			2.4 CITY-ST-ZIP	Davie FL 33331		
TITLE		<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				3.2 NAME			
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY-ST-ZIP				4.4 CITY-ST-ZIP			
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 do 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, changed, or on an attachment with an address.

SIGNATURE:

[Signature]

9/8/97

(954) 252-8522

CR2E034 (4/97)