


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

FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # **L16176** (4)
1. Corporation Name
SYNAGEN ACQUISITION CORPORATION



Principal Place of Business % CHARLES E. HARRIS 1030 N. ORANGE AVE., SUITE 300 ORLANDO FL 32801-1031 US	Mailing Address % CHARLES E. HARRIS 1030 N. ORANGE AVE., SUITE 300 ORLANDO FL 32801-1031 US
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 8801 Vistana Centre Drive Suite, Apt. #, etc. 22 2nd Floor, Executive Office City & State 23 Orlando, FL Zip 24 32821		2a. Mailing Address 26 P. O. Box 568589 Suite, Apt. #, etc. 27 City & State 28 Orlando, FL Zip 29 32856 Country 30 USA		3. Date Incorporated or Qualified 09/14/1989	
4. FEI Number 59-2969050		Applied For <input type="checkbox"/> Not Applicable		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		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
9. Name and Address of Current Registered Agent HARRIS, CHARLES E. 1030 N. ORANGE AVE. SUITE 300 ORLANDO FL 32801				10. Name and Address of New Registered Agent 81 Name Charles E. Harris 82 Street Address (P.O. Box Number is Not Acceptable) 8801 Vistana Centre Drive 83 2nd Floor, Executive Office 84 City Orlando FL 85 Zip Code 32821	

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 **Charles E. Harris**

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

(NOTE: Registered Agent signature required when reinstalling)

2/13/98

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HARRIS, CHARLES E. 3339 NORTHGLENN DR ORLANDO FL <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST HEDGECOCK, SUZANNE D. 807 E. MILLER ST ORLANDO FL <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

2/13/98

407 220 2152

CR2E034 (10/97)