
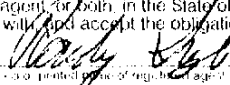
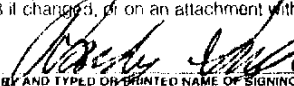


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 28 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # L30107 (1)</b>					
<b>1. Corporation Name</b> <b>THE SMYTH TEAM, INC.</b>					
<b>Principal Place of Business</b> 216 TEXAS STREET FORT WALTON BEACH FL 32548			<b>Mailing Address</b> 216 TEXAS STREET FORT WALTON BEACH FL 32548-5045		
<b>2. Principal Place of Business</b>		<b>2a. Mailing Address</b>		<b>3. Date Incorporated or Qualified</b> 11/14/1989	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		<b>3a. Date of Last Report</b> 04/16/1996	
22 City & State		27 City & State		<b>4. FEI Number</b> 59-2978133	
23 Zip		28 Zip		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
25 Country		30 Country		<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24		29		<b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>9. Name and Address of Current Registered Agent</b> FLEET, H. BART 1201 NORTH EGLIN PARKWAY SHALIMAR FL 32579				<b>10. Name and Address of New Registered Agent</b>	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				FL 85 Zip Code	
<b>11. Pursuant to the provisions of Sections 607.0503 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, for 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.</b>					
SIGNATURE:  <b>RANDY SMYTH</b> DATE: 4.21.97					
(NOTE: Registered Agent signature required when reinstating)					
<b>12. OFFICERS AND DIRECTORS</b>			<b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
P SMYTH, RANDY			1.1 TITLE		
216 TEXAS STREET			1.2 NAME		
FORT WALTON BEACH FL 32548			1.3 STREET ADDRESS		
			1.4 CITY - ST - ZIP		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
2.1 TITLE			2.2 NAME		
2.3 STREET ADDRESS			2.4 CITY - ST - ZIP		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
3.1 TITLE			3.2 NAME		
3.3 STREET ADDRESS			3.4 CITY - ST - ZIP		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
4.1 TITLE			4.2 NAME		
4.3 STREET ADDRESS			4.4 CITY - ST - ZIP		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
5.1 TITLE			5.2 NAME		
5.3 STREET ADDRESS			5.4 CITY - ST - ZIP		
<input type="checkbox"/> DELETE			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
6.1 TITLE			6.2 NAME		
6.3 STREET ADDRESS			6.4 CITY - ST - ZIP		
<b>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 or on an attachment with an address.</b>					
SIGNATURE:  <b>RANDY SMYTH</b> DATE: 4.21.97 DAYTIME PHONE: 9042439463					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (9/96)