## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. FILED AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Oct 07 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)XIOTIS, INC. Principal Place of Business Mailing Address 5341 W. ATLANTIC AVE. % JAMES G. KAFANTARIS 801 S. FEDERAL HIGHWAY DELRAY BEACH FL 33484 HOLLYWOOD FL 33020 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1**9**89 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0158523 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required Ò City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζıp This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KAFANTARIS, JAMES G. 1000 COLONY POINT CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) #303 83 PEMBROKE PINES FL 33026 84 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 THUE Change Addition KAFANTARI, JAMES G NAME 1.2 NAME 2701 RIVERSIDE DRIVE APT 107 STREET ADDRESS 13 STREET ADDRESS CORAL SPRINGS FL CITY-ST-ZIP 14 C(TY-ST-2)P TITLE DELETE Change Addition 2.2 NAME 100002655181 STREET ADDRES -10/08/98---01058---**0**35 2.3 STREET ADDRESS 18 BUBMANOI WN 6288 CITY-ST-ZIP 2.4 CITY-ST-ZIP \*\*\*150.00 Cozal Springs 4133065 DELETE TITLE 3.1 TITLE \_\_\_ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE 4.2 NAME STREET ADDRESS 4 3 STREET ADDRESS

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 acturate 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 receivor 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.

4.4 CITY-ST-ZIP

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5.4 CITY-ST-ZIP

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Addition