SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

PROFIT
CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 08 1998 8:00am
Secretary of State

DOCUMENT # M14542 (8)

1. Corporate Name
CAPPAMORE CORPORATION

Principal Place of Business
13550 SAND RIDGE ROAD
PALM BEACH GARDENS FL 33418

Mailing Address
13550 SAND RIDGE ROAD
PALM BEACH GARDENS FL 33418

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/26/1985

4. FEI Number
65-0132724
[ ] Applied For
[ ] Not Applicable

5. Certificate of Status Desired [X] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 [ ] Yes [ ] No

2. Principal Place of Business
21
Suite Apt # etc
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite Apt # etc
27
City & State
28
Zip 29 County 30

9. Name and Address of Current Registered Agent
HYNES, W. STANLEY
13550 SAND RIDGE RD.
PALM BEACH GARDENS FL 33418

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1505, 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 and am familiar with and accept the obligations of section 607.0505, Florida Statutes.

SIGNATURE
Name of Officer or Director Listed in Section 12 or Incorporator if Section 12 Is Blank — Title — Date

12. OFFICERS AND DIRECTORS

Title	DP	[ ] Delete
Name	HYNES, W. STANLEY	
Street Address	13550 SANDRIDGE RD.	
City-St-Zip	PALM BCH.GARDENS FL	
Title	D	[ ] Delete
Name	HYNES, EVELYN R.	
Street Address	13550 SANDRIDGE RD.	
City-St-Zip	PALM BCH.GARDENS FL	
Title	D	[ ] Delete
Name	HYNES, JACQUELINE	
Street Address	13550 SANDRIDGE RD.	
City-St-Zip	PALM BEACH GARDENS FL	
Title	D	[ ] Delete
Name	HYNES, EVA M.	
Street Address	13550 SANDRIDGE RD.	
City-St-Zip	PALM BEACH GARDENS FL	
Title	D	[ ] Delete
Name	HYNES, JOHN	
Street Address	13550 SANDRIDGE RD.	
City-St-Zip	PALM BEACH GARDENS FL	
Title	D	[X] Delete
Name	HYNES, SARAH M	
Street Address	13550 SAND RIDGE RD	
City-St-Zip	PALM BEACH GARDENS FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 Title		[ ] Change [ ] Addition
12 Name		
13 Street Address		
14 City-St-Zip		
21 Title		[ ] Change [ ] Addition
22 Name		
23 Street Address		
24 City-St-Zip		
31 Title		[ ] Change [ ] Addition
32 Name		
33 Street Address		
34 City-St-Zip		
41 Title		[ ] Change [ ] Addition
42 Name		
43 Street Address		
44 City-St-Zip		
51 Title		[ ] Change [ ] Addition
52 Name		
53 Street Address		
54 City-St-Zip		
61 Title		[ ] Change [ ] Addition
62 Name		
63 Street Address		
64 City-St-Zip		

14. I hereby certify that the information supplied with this report does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this report or supplemental 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 Section 12 or Block 13 if changed, or is stated to be listed with an address.

SIGNATURE: [signature] 9/28/98

C98000034159