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

PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 M23001 **DOCUMENT #** INTERNATIONAL ADMIRALTY CONSULTANTS, INC. Principal Place of Business Mailing Address 17021 S.W. 62 STREET 17021 S.W. 62 STREET FT. LAUDERDALE FL 33331 FT. LAUDERDALE FL 33331 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/05/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2671760 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RODRIGUEZ, DOMINGO C 81 Name 9350 SOUTH DIXIE HWY. 82 Street Address (P.O. Box Number is Not Acceptable) STE. 1550 83 **MIAMI FL 33156** 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 Horida. 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 Signature, typed or printed name of registerest agent and tilled applicable (NGTE_Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TIFLE Change Addition NAME **HELLER, ANDREW** 1.2 NAME 17021 S.W. 62 STREET STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE TITLE 2.1 TITLE Change Addition 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHTY - ST - ZIP DELETE TITLE 3.1 THUE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREFT ADDRESS CITY-ST-ZIP 5.4 City-St-ZiP DELETE Change TITLE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby 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 trustly empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

K-1-98