

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Aug 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # M75875 (8)
1. Corporation Name
FUTON IDEAS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
5081 SHERIDAN STREET
HOLLYWOOD FL 33021

Mailing Address
5081 SHERIDAN STREET
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

| | | | | | |
|---|--|---------------------|--|--|-----------------------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 | | 26 | | 04/08/1988 | 06/14/1996 |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 4. FEI Number | Applied For Not Applicable |
| 22 | | 27 | | 65-0206374 | |
| City & State | | City & State | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| 23 | | 28 | | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | | Zip | | 8. 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 | |
| 24 | | 29 | | | |
| Country | | Country | | | |
| 25 | | 30 | | | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | |
| IVLER, J. GEORGE 20685 LYONS RD #A-1, A-2 BOCA RATON FL 33434 | | | | 81 Name DAVID IULER 82 Street Address (P.O. Box Number is Not Acceptable) 6665 BISCAYNE BLVD 83 84 City M.A.M. FL 85 Zip Code 33138 | |

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 P-15-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|----------------------|---|-----------------------|
| TITLE | PD | 1.1 TITLE | |
| NAME | DAVID, IULER | 1.2 NAME | |
| STREET ADDRESS | 5081 SHERIDAN STREET | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | HOLLYWOOD FL 33021 | 1.4 CITY-ST-ZIP | |
| TITLE | | 2.1 TITLE | |
| NAME | | 2.2 NAME | 200002281382--6 |
| STREET ADDRESS | | 2.3 STREET ADDRESS | -08/29/97--01095--003 |
| CITY-ST-ZIP | | 2.4 CITY-ST-ZIP | ***165.00 ***165.00 |
| TITLE | | 3.1 TITLE | |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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 if changed, or in an attachment with an address.

SIGNATURE P-15-97 200002281382--6

CR2E034 (4/97)

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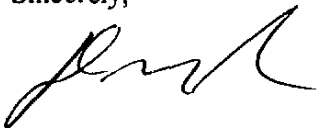
August 15, 1997

Leslie Sellers
Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Dear Leslie,

As we discussed in our telephone conversation, I am sending you the completed second notices of the corporation renewals. My original first notices were completed and sent in April of this year including payment. When I received the second notices and called Tallahassee, I realized that something had gone wrong and my package must have been lost. I also checked with my bank and the check was never cashed. Nevertheless, I truly appreciate your help and understanding and am re-submitting everything directly to you.

Sincerely,



David J. Ivler
305-754-3738