


FILE NOW: FILING FEE IS \$61.25

FILED
Jun 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000004877 (5)**

1. Corporation Name

UP FRONT CLUB, INC.



Principal Place of Business 9999 NORTHEAST 2ND AVENUE #116 MIAMI FL 33138	Mailing Address 9999 NORTHEAST 2ND AVENUE #116 MIAMI FL 33138-2344
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2. Principal Place of Business 21		2a. Mailing Address 26		3. Date Incorporated or Qualified 10/11/1995	3a. Date of Last Report 10/23/1996
Sulte, Apt. #, etc. 22		Sulte, Apt. #, etc. 27		4. FEI Number NOT APPLICABLE	Applied For Not Applicable
City & State 23		City & State 28		5. Certificate of Status Desired <input checked="" type="checkbox"/> NOT APPLICABLE	\$8.75 Additional Fee Required
Zip 24	Country 25	Zip 29	Country 30	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MUMFORD, BOBBIE 9999 NORTHEAST 2ND AVENUE #116 MIAMI FL 33138				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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUMFORD, BOBBIE	1.2 NAME	
STREET ADDRESS	9999 N.W. 2ND AVNEUE, SUITE 116	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33138	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOUSTON, AL	2.2 NAME	
STREET ADDRESS	789 N.W. 82ND STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33127	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LONG, HAROLD ESQ.	3.2 NAME	
STREET ADDRESS	4770 BISCAYNE BLVD., SUITE 1480	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33137	3.4 CITY-ST-ZIP	
TITLE	VC <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REEVES, RACHEL	4.2 NAME	
STREET ADDRESS	900 N.W. 54TH STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33127	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIAMS, JOHNNY	5.2 NAME	
STREET ADDRESS	5757 N.W. 27TH AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33142	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOODSON-BRYANT, SHARON	6.2 NAME	
STREET ADDRESS	8240 CLEARY BLVD., #2415	6.3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL 33324	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 617, Florida Statutes; and that my name appears in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE *Bobbie Mumford* Bobbie Mumford 6/12/97 325/7750

CR2E037 (9/96)