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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002159

1. Corporation Name

SHPE-TAMPA INTERNATIONAL PROFESSIONAL CHAPTER, I NC.

Principal Place of Business

 336 18TH AVENUE NE
 ST. PETERSBURG FL 33704-3507

Mailing Address

 336 18TH AVENUE NE
 ST. PETERSBURG FL 33704-3507


* 6 619444-90011-38 4 *



2. Principal Place of Business 21 4111 SPARROW CT.	2a. Mailing Address 26 P.O. BOX 17120	3. Date Incorporated or Qualified 04/22/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3369264
City & State 23 LUTZ, FLORIDA	City & State 28 TAMPA, FLORIDA	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required
Zip 24 33549	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
29 33682	30	

9. Name and Address of Current Registered Agent

HARRIS, ROD
336 18TH AVENUE NE
ST. PETERSBURG FL 33704-3507

10. Name and Address of New Registered Agent

81 Name	RICARDO RAUDALES
82 Street Address (P.O. Box Number is Not Acceptable)	4111 SPARROW CT.
83	
84 City	LUTZ FL
85 Zip Code	33549

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/22/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	D
NAME	HARRIS, ROD	1.2 NAME	ROD HARRIS
STREET ADDRESS	336 18TH AVE NE	1.3 STREET ADDRESS	336 18TH AVE NE
CITY-ST-ZIP	ST PETERSBURG FL 33704	1.4 CITY-ST-ZIP	ST PETERSBURG, FL 33704
TITLE	VD	2.1 TITLE	D
NAME	MORENO, WILFRIDO	2.2 NAME	WILFRIDO MORENO
STREET ADDRESS	9827 CIR. FREDERICK ST.	2.3 STREET ADDRESS	9827 CIR. FREDERICK ST.
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	TAMPA, FL 33637-4909
TITLE	SD	3.1 TITLE	D
NAME	RAUDALES, RICARDO	3.2 NAME	RICARDO RAUDALES
STREET ADDRESS	4111 SPARROW COURT	3.3 STREET ADDRESS	4111 SPARROW COURT
CITY-ST-ZIP	LUTZ FL	3.4 CITY-ST-ZIP	LUTZ FL 33549
TITLE	T	4.1 TITLE	
NAME	PADELS, ELIZABETH	4.2 NAME	
STREET ADDRESS	3901 COCONUT PALM DR, SUITE 115	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33619	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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICARDO RAUDALES

Date

Daytime Phone #

8/22/99 (813) 960-0002

CR2E037 (5/99)