

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

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**Feb 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P05028 (6)

1. Corporation Name
PARISIAN, INC.



Principal Place of Business 750 LAKESHORE PKWY BIRMINGHAM AL 35211	Mailing Address 750 LAKESHORE PKWY BIRMINGHAM AL 35211
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/15/1985	
21. Suite, Apt. #, etc	22. City & State	26. Suite, Apt. #, etc	27. City & State	4. FEI Number 63-0680839	Applied For <input type="checkbox"/> Not Applicable
23. Zip	25. Country	28. Zip	30. Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	FL
83.	
84. City	

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO HESS, DONALD	1.1 TITLE	Change
NAME	750 LAKESHORE PKWY	1.2 NAME	Addition
STREET ADDRESS	BIRMINGHAM AL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VT COLTHARP, DOUGLAS E	2.1 TITLE	<input type="checkbox"/>
NAME	3455 HIGHWAY 80 WEST	2.2 NAME	<input type="checkbox"/>
STREET ADDRESS	JACKSON MS	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	VS MARTIN, BRIAN J	3.1 TITLE	<input type="checkbox"/>
NAME	750 LAKESHORE PARKWAY	3.2 NAME	<input type="checkbox"/>
STREET ADDRESS	BIRMINGHAM AL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D COGGIN, JAMES A	4.1 TITLE	<input type="checkbox"/>
NAME	3455 HIGHWAY 80 WEST	4.2 NAME	<input type="checkbox"/>
STREET ADDRESS	JACKSON MS	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D MARTIN, R B	5.1 TITLE	<input type="checkbox"/>
NAME	115 NO CALDERWOOD	5.2 NAME	<input type="checkbox"/>
STREET ADDRESS	ALCOA TN	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	V SMITH, GARY	6.1 TITLE	<input checked="" type="checkbox"/>
NAME	750 LAKESHORE PARKWAY	6.2 NAME	<input type="checkbox"/>
STREET ADDRESS	BIRMINGHAM AL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

William Cappiello - President

**750 Lakeshore Pkwy
Birmingham, AL 35242**

Director Donald Hess

**750 Lakeshore Pkwy
Birmingham, AL 35242**

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]*

1/23/98 205-940-4000

CR2E084 (10/97)