


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

FILED
Feb 05 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 # P35009 (0)
 1. Corporation Name
AGROVIT, INC.



Principal Place of Business 4830 W. KENNEDY BLVD. URBAN CENTER 1 STE. 840 TAMPA FL 33609 US	Mailing Address 4830 W. KENNEDY BLVD. URBAN CENTER 1 STE. 840 TAMPA FL 33609 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 4830 W. KENNEDY BLY D. Suite, Apt. #, etc.	2a. Mailing Address 26 4830 W. KENNEDY BLY D. Suite, Apt. #, etc.
22 URBAN CENTER 1 STE. 650 City & State	27 URBAN CENTER 1 STE. 650 City & State
23 TAMPA, FL. Zip	28 TAMPA, FL. Zip
24 33609 Country 25 U.S.A.	29 33609 Country 30 U.S.A.

3. Date Incorporated or Qualified 08/08/1991	
4. FEI Number 59-3077236	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

g. Name and Address of Current Registered Agent

ROWE, JAMES C
RIDEN, EARL & KIEFNER P.A.
100 2ND AVE. S. STE. 400N
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent


81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 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 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 reinstalling) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROWE, JAMES C	1.2 NAME	
STREET ADDRESS	100 2ND AVE.S. STE. 400N	1.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33701	1.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ABASHKIN, SERGEI	2.2 NAME	ABASHKIN, SERGEI
STREET ADDRESS	4830 W. KENNEDY BLVD., SUITE 840	2.3 STREET ADDRESS	4830 W. KENNEDY BLVD., SUITE 650
CITY-ST-ZIP	TAMPA FL	2.4 CITY-ST-ZIP	TAMPA FL
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 SERGEI ABASHKIN** 1/27/98 (813) 282-00-99

CR2E034 (10/97)