

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 26 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 # **P38530** (2)
1. Corporation Name
AU INTERNATIONAL, INC.



Principal Place of Business % RICHARD R. COOK P.O. BOX 1929 DELAND FL 32721	Mailing Address % RICHARD R. COOK P.O. BOX 1929 DELAND FL 32721
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/23/1992	
21		26		4. FEI Number 59-2993618	
22		27		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24		29		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	

9. Name and Address of Current Registered Agent

**COOK, RICHARD R.
444 SEABREEZE AVE
435
DAYTONA BCH FL 32118**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable) 2253 RIVER RIDGE
83	
84 City DELAND	85 Zip Code FL 32720

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

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	CD	1.1 TITLE	T/D
NAME	FLOUNDERS, ROBERT A.	1.2 NAME	J. ALLEN THUMSER
STREET ADDRESS	6709 CACTUS CT	1.3 STREET ADDRESS	3 OCEANS WEST BLVD #7-C-5
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	DAYTONA BEACH, FL, 32118
TITLE	D	2.1 TITLE	
NAME	COOK, RICHARD R.	2.2 NAME	
STREET ADDRESS	P.O. BOX 1929 (N/A)	2.3 STREET ADDRESS	
CITY-ST-ZIP	DELAND FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	
NAME	PRESLEY, E.T.	3.2 NAME	
STREET ADDRESS	828 JOHN ANDERSON DR	3.3 STREET ADDRESS	3 OCEANS WEST BLVD #3-B-6
CITY-ST-ZIP	ORMOND BEACH FL	3.4 CITY-ST-ZIP	DAYTONA BEACH, FL, 32118
TITLE	SD	4.1 TITLE	
NAME	SCHONSHECK, DAROLD	4.2 NAME	
STREET ADDRESS	315 RIO PINAR	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	SPENCER, JACK	5.2 NAME	
STREET ADDRESS	608 MALLORY CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	STONE MOUNTAIN GA	5.4 CITY-ST-ZIP	
TITLE	PD	6.1 TITLE	
NAME	DONALD S THAYER	6.2 NAME	
STREET ADDRESS	6 FOUNTAINBLEAU CIRCLE	6.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	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: *J. Allen Thumser*

8/18/98 904-757-2861

CR2E034 (5/98)