


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

FILED
Jan 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 # P92000009808 (6)
1. Corporation Name
FULL LIFE, INC.

Principal Place of Business 11318 NW 43RD PLACE CORAL SPRINGS FL 33065	Mailing Address 11318 NW 43RD PLACE CORAL SPRINGS FL 33065
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9115 NW 41st MANOR 22 Suite, Apt. #, etc.		2a. Mailing Address 26 9115 NW 41st MANOR 27 Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/03/1992	
23 City & State CORAL SPRINGS FL 24 Zip 33065		28 City & State CORAL SPRINGS FL 29 Zip 33065		4. FEI Number 65-0372595 Applied For Not Applicable	
25 Country USA		30 Country		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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent TABINO, FRANK 11318 NW 43RD PLACE CORAL SPRINGS FL 33067				10. Name and Address of New Registered Agent 81 Name FRANK TABINO 82 Street Address (P.O. Box Number is Not Acceptable) 9115 N.W. 41st MANOR 83 84 City CORAL SPRINGS FL 85 Zip Code 33065			
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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	D	<input type="checkbox"/> DELETE		1.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TABINO, TONI			1.2 NAME	TABINO, TONI		
STREET ADDRESS	11318 NW 43RD PLACE			1.3 STREET ADDRESS	9115 NW 41st MANOR		
CITY-ST-ZIP	CORAL SPRINGS FL 33065			1.4 CITY-ST-ZIP	CORAL SPRINGS FL 33065		
TITLE	D	<input type="checkbox"/> DELETE		2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	TABINO, FRANK SR			2.2 NAME	TABINO, FRANK SR		
STREET ADDRESS	11318 NW 43RD PLACE			2.3 STREET ADDRESS	9115 NW 41st MANOR		
CITY-ST-ZIP	CORAL SPRINGS FL 33065			2.4 CITY-ST-ZIP	CORAL SPRINGS FL 33065		
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: Frank Tabino FRANK TABINO 1/17/98 954418-0051

CR2E034 (10/97)