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FILED
Mar 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000000324 (2)

1. Corporation Name
AHRCO, INC.

Principal Place of Business
3033 RIVIERA DR. STE 201
NAPLES FL 34103
US

Mailing Address
3033 RIVIERA DR. STE 201
NAPLES FL-33940 34103



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/04/1993	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0572937	
22	City & State	27	City & State	Applied For Not Applicable	
23	Zip	28	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24	Country	29	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
25	Country	30	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BUDD, DAVID G 3033 RIVIERA DR. STE 201 NAPLES FL 34103		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

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	PD	1.1 TITLE	
NAME	RUBIN, ALEX	1.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	1.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	
NAME	RUBIN, BENJAMIN	2.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	2.4 CITY-ST-ZIP	
TITLE	VAS	3.1 TITLE	
NAME	RUBIN, LINDA	3.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	3.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	BUDD, DAVID G	4.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	4.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	4.4 CITY-ST-ZIP	
TITLE	DST	5.1 TITLE	
NAME	RUBIN, HARRY	5.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	5.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL 33940	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	
NAME	ZUCERO, SHARON M	6.2 NAME	
STREET ADDRESS	3033 RIVIERA DR. STE 201	6.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES 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:

David G. Budd

David G. Budd

3/2/98

(941) 263-7700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

043834

CR2E034 (10/97)