


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

FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Moftam Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P93000002409 (9)		
1. Corporation Name SWIMAMERICA, INC.		



Principal Place of Business 2101 N ANDREWS AVE SUITE 107 FT. LAUDERDALE FL 33311 US	Mailing Address 2101 N ANDREWS AVE SUITE 107 FT. LAUDERDALE FL 33311 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address 26 Suite, Apt. #, etc. City & State Zip Country
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3. Date Incorporated or Qualified 01/06/1993	4. FEI Number 65-0388427	Applied For 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		

9. Name and Address of Current Registered Agent LEONARD, JOHN 301 S E 20TH ST FT. LAUDERDALE FL 33316	
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10. Name and Address of New Registered Agent	
81 Name Leonard, John	82 Street Address (P.O. Box Number Is Not Acceptable) 2101 N. Andrews Ave
83 Suite 107	84 City Ft. Lauderdale FL
85 Zip Code 33311	

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D LEONARD, JOHN 301 SE 20TH STREET FT. LAUDERDALE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D MONTRELLA, JIM 1498 PEMBERTON DR COLUMBUS OH 43221
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D DALAND, PETER 4235 LAUREL GLEN MOORE PARK CA 93021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D BLAIR, PAUL 1 HUNTINGTON DR LITTLE ROCK AR 72207
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D HANSEL, PHILL 2426 RICHTON ST HOUSTON TX 77098
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE D MCKEE, KATHY 4025 WOODRIDGE WAY TUCKER GA 30084

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D Leonard, John 2101 N. Andrews Ave, Suite 107 Ft. Lauderdale, FL 33311
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, 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 _____

CR2E034 (10/97)