

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

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000050995
1. Corporation Name
crystals and Connectors Express, Inc.

FILED
97 AUG -1 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 6767 N. Wickham Rd Ste #400 Melbourne, FL 32940	Mailing Address 40 JSN P.O. Box 1073 Hightstown, NJ 08520
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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
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3. Date Incorporated or Qualified 7/12/93	3a. Date of Last Report 1996
4. FEI Number 59-3190598	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" 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 has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent Farley, Edward J. 6767 N. Wickham Rd Ste #400 Melbourne, FL 32940	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS	
TITLE	President <input type="checkbox"/> DELETE
NAME	Nolan, Susan
STREET ADDRESS	1626 Route 130
CITY-ST-ZIP	North Brunswick, NJ 08902
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	000002262150--2
1.3 STREET ADDRESS	-08/08/97--01120--001
1.4 CITY-ST-ZIP	****173.75 ****173.75
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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: Susan Nolan, Pres. 7/29/97 908-422-9424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

20f2
Crystal and Connectors Express Incorporated

CRYSTALS AND CONNECTORS, INC.

Crystal

c/o JSN

P.O. Box 1073

Hightstown, NJ 08520

P93000050995

July 1, 1997

Florida Department of State
Annual Reports Section
Post Office Box 6327
Tallahassee, Florida 32314

Re: Crystals and Connectors Express Inc.
Document #: P93000050995
FEI Number: 59-3190598

Dear Sir or Madam:

We have noticed that the above-referenced corporation has not received the forms for filing its 1997 Florida annual report. This company has experienced difficulty in receiving its mail; therefore, please confirm that all correspondence is directed to the above address (including "care of JSN"). Please correspond with us at this address with instructions for bringing this company's corporate status up to date.

Thank you for your prompt attention to this request.

Sincerely,



Susan Nolan
President