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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 22 1998 8:00am

Secretary of State

4-14-98 305-652-2767

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000051101 (2)

Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

STEVEN STYLES, INC.

Principal Place of Business Mailing Address 20850 SAN SIMEON WAY 20850 SAN SIMEON WAY DO NOT WRITE IN THIS SPACE N. MIAMI BEACH FL 33179 N. MIAMI BEACH FL 33179 3. Date Incorporated or Qualified 07/16/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0427000 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BATTAGLIA, STEVEN 20850 SAN SIMEON WAY Street Address (P.O. Box Number is Not Acceptable) #507 83 N. MIAMI BEACH FL 33179 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Fiorida 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 R2E034 (10/97 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE **BATTAGLIA, STEVEN** NAME 1.2 NAME 20850 SAN SIMEON WAY, #507 STREET ADDRESS 1.3 STREET ADORESS N. MIAMI BEACH FL 33179 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TIBLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIF 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - S1 - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY-ST-ZIF Change DELETE Addition TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADORESS **6 3 STREET ADDRESS** 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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

STEVE BATTAGNA