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

P**R**OFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000086162 (3)

MARTHA'S HEADHUNTERS INC. Principal Place of Business Mailing Address 5177 OVERSEAS HIGHWAY 5177 OVERSEAS HIGHWAY MARATHON FL 33050 MARATHON FL 33050 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/13/1993 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 65-0479883 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Yes ΠÑο 24 30 Personal Property Tax due June 30. 25 29 n. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DIEHL, MARTHA R 110 ALLYANN PLACE 82 Street Address (P.O. Box Number is Not Acceptable) MARATHON FL 33050 83 84 City 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 hame of regulared agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 1.1 TITLE DIEHL, MARTHA R 1,2 NAME NAME 110 ALLYANN PLACE STREET ADDRESS 1.3 STREET ADDRESS MARATHON FL 33050 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Change ■ Addition DIEHL, HELMUT M NAME **2.2 NAME** 110 ALLYANN PLACE STREET ADDRESS 2.3 STREET ADDRESS MARATHON FL 33050 CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$T-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE Change Addition TITLE 6.1 TITLE

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.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

.....

NAME

STREET ADDRESS

CITY-ST-ZIP

THE PERSON

SMatt. Dich

11 12 46

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FILED

Apr 27 1998 8:00am

Secretary of State