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

FILED Apr 20 1998 8:00am LORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P9400006413 (6) SCC MANAGEMENT SERVICES, INC. Principal Place of Business Mailing Address 440 ROYAL PALM WAY 440 ROYAL PALM WAY SUITE 202 **SHITE 202** DO NOT WRITE IN THIS SPACE PALM BEACH FL 33480 PALM BEACH FL 33480 3. Date Incorporated or Qualified 01/26/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0463662 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional X 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 28 Zip. Country Country 8. This corporation owes or has paid the current year Intangible X Yes 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **GLENN E. STRAUB** 440 ROYAL PALM WAY Street Address (P.O. Box Number is Not Acceptable) **SUITE 202** 83 PALM BEACH FL 33418 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 Stgnature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME STRAUB, GEORGE 1.2 NAME STREET ADDRESS 440 ROYAL PALM WAY 1 3 STREET ADDRESS PALM BEACH FL 33480 CITY-ST-ZIF 1.4 CITY - ST - 2IP DELETE Addition TITLE 2.1 TITLE STRAUB, GLENN E NAME 2.2 NAME 440 ROYAL PALM WAY, STE 202 STREET ADDRESS 2 3 STREET ADDRESS PALM BEACH FL 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 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ACCORESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE NAME 5 2 NAME

14. Thereby 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 extress.

DELETE

53 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

SIGNATURE: 9

STREET ADDRESS

STREET ADORESS

CITY - ST - ZIP

THILE

3/30/98

561-655-4441

Change

Addition

CR2E034 (10/97