

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

May 05 1998 8:00am
Secretary of State

DOCUMENT # P94000047677 (7)

Corporation Name
C F GROUP, INC.

Principal Place of Business: ONE PROGRESS PLAZA, BARNETT TOWER #2200, ST PETERSBURG FL 33701
Mailing Address: ONE PROGRESS PLAZA, BARNETT TOWER #2200, ST PETERSBURG FL 33701-4353

5. Date Incorporated or Qualified: 06/27/1994
3... Date of Last Report: 03/11/1998 7

1. Principal Place of Business: 111 2nd Avenue, NE, Suite # 704, St. Petersburg, FL 33701
2a. Mailing Address: P.O. Box 531, Suite, Apt. #, etc., St. Petersburg, FL 33731
Country: U.S.A.

4. FEI Number: 59-3250295
Applied For: Not Applicable

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contributor: \$5.00 May Be Added to Fees

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

7. Name and Address of Current Registered Agent: MEANA, JAVIER C, ONE PROGRESS PLAZA, BARNETT TOWER #2200, ST PETERSBURG FL 33701

10. Name and Address of New Registered Agent: 81 Name: Meana, Javier C.
82 Street Address (P.O. Box Number is Not Acceptable): 111 2nd Avenue, N.E., Suite # 704
84 City: St. Petersburg, FL 85 Zip Code: 33701

I, 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 name of registered agent and title if applicable (NOTE: Registered Agent signature required when renating) DATE

2. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO REGISTERED OFFICERS AND DIRECTORS	
TITLE: D <input type="checkbox"/> DELETE	MEANA, JAVIER C	1.1 TITLE: D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	Meana, Javier C.
NAME: MEANA, JAVIER C	1520 Rafael Blvd., N.E.	1.2 NAME: MEANA, JAVIER C.	111 2nd Avenue, N.E., Suite #704
STREET ADDRESS: 1520 Rafael Blvd., N.E.	St. Petersburg, FL 33704	1.3 STREET ADDRESS: MEANA, JAVIER C.	111 2nd Avenue, N.E., Suite #704
CITY-ST-ZIP: St. Petersburg, FL 33704		1.4 CITY-ST-ZIP: MEANA, JAVIER C.	St. Petersburg, FL 33701
TITLE: <input type="checkbox"/> DELETE		2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		2.2 NAME:	
STREET ADDRESS:		2.3 STREET ADDRESS:	
CITY-ST-ZIP:		2.4 CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> DELETE		3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		3.2 NAME:	
STREET ADDRESS:		3.3 STREET ADDRESS:	
CITY-ST-ZIP:		3.4 CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> DELETE		4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		4.2 NAME:	
STREET ADDRESS:		4.3 STREET ADDRESS:	
CITY-ST-ZIP:		4.4 CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> DELETE		5.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		5.2 NAME:	
STREET ADDRESS:		5.3 STREET ADDRESS:	
CITY-ST-ZIP:		5.4 CITY-ST-ZIP:	
TITLE: <input type="checkbox"/> DELETE		6.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		6.2 NAME:	200002512602
STREET ADDRESS:		6.3 STREET ADDRESS:	-05/06/98--01014--047
CITY-ST-ZIP:		6.4 CITY-ST-ZIP:	***150.00

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 in an attachment with an address.

SIGNATURE: J. Meana
April 28 1998 (813) 823-0505

CR2E034 (9/96)