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Mar 02 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000068668 (0)

1. Corporation Name

SANDPIPER INVESTMENTS OF SW FLORIDA, INC.



Principal Place of Business	Mailing Address
C/O EURO-AMERICAN CONSULTING, INC. 4001 TAMiami TRAIL N. #265 NAPLES FL 34103 US	C/O EURO-AMERICAN CONSULTING, INC. 4001 TAMiami TRAIL N. #265 NAPLES FL 34103 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt #, etc.		26 Suite, Apt #, etc.		09/16/1994	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		65-0571234	
24 Country		29 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input 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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

4001 TAMiami TRAIL NORTH INC
400 5TH AVE. S.
SUITE 265
NAPLES FL 34103

81 Name	Euro-American Consulting, Inc.
82 Street Address (P.O. Box Number is Not Acceptable)	
83	4001 Tamiami Trail North
	Suite 265
84 City	Naples
85 Zip Code	FL 34103

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] N. Filthaut, President

2/25/98

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	
NAME	GROSSMANN, RUDOLF	1.2 NAME	
STREET ADDRESS	776 ORCHID CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 33937	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	
NAME	ROMAN, DORIS	2.2 NAME	
STREET ADDRESS	2281 CLIPPER WAY	2.3 STREET ADDRESS	
CITY-ST-ZIP	NAPLES FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 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:

[Signature] Rudolf Grossmann 2/25/98 (941) 643-11

CF2E034 (10/97)