c	١
4	t
	ú
	į
	١

Principal Place of Business 10 ISSO AKE E 10 ANA IR CRISE MARING AND STE 800 MAN E 1 2016 MAN E 201	ANNUA	ROFIT PORATION AL REPORT 998-99 A	Sandra B. Secretary		FILED TH
SERFICO INVESTMENTS. INC.    SECRETARY OF STATE   STAT	DOCUM	APPAIT ()	~·····································		99 FEB -3 AM 11: LL
Principal Place of Business  Mailing Address  C/O ALAN R CHASE  980 S INDRAND BLVD. STE 600  MAN R T 33156  2. Principal Place of Business  Mailing Address  So S INDRAND BLVD. STE 600  MAN R T 33156  2. Principal Place of Business  DO NOT WRITE IN THIS SPACE  3. Date Incorporated of Guidfield  997.2/1994  4. Tel Normer  1. Principal Place of Business  SUBJECT STEP STEP STEP STEP STEP STEP STEP STE			(0)		SECRETARY OF STATE
MAINTER AFFERDAME   SO SAMELAND BLVD. STE 800	OLIII 100	HAVEOTHICITIO, HAO.			TALLAHASSEE. FEORIGA
SIMPLE AND BUNDERS BUN	Principal Place	of Business	Mailing Address		
2. Migling Address   Section of Business   S	SUITE 204-B		9400 S. DADELAND BLVD	STE 600	DO NOT WRITE IN THIS SPACE
2. Migling Address of Business 11   Many BLVD 22   May May 15   May 15   May 16   Ma					1
Sufficient of Statuto Development of Sections (S7.75.05) and (S7.7	2. Principal Pla				4. FEI Number 59 - 2307757 Applied For
The Pursuant to the provisions of sections 607.0502 and 607.1508, Fiords Statutes, the above named corporation submits his statement for the purpose of changing his registered agent of the origination of sections from the state of provisions of sections 607.0502 and 607.1508, Fiords Statutes, the above named corporation submits his statement for the purpose of changing his registered agent of the purpose of changing his registered agent of the corporation submits his statement for the purpose of changing his registered agent and for the purpose of changing his registered agent and for the purpose of changing his registered agent and for the purpose of changing his registered agent and for the purpose of changing his registered agent and for the purpose of changing his registered agent and for the purpose of changing his registered of sections for the purpose of changing his registered of agent, or both, in the State of Florids Statutes, the above named corporation submits his statement for the purpose of changing his registered of agent, or both, in the State of Florids Statutes, the above named corporation submits his statement for the purpose of changing his registered of agent, or both, in the State of Florids Statutes, the above named corporation submits his statement for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of affects of previous for the purpose of changing his registered of previous for the purpose of changing his registered affects of the corporation submits his statement of the purpose of changing his registered affects of the corporation submits h	<del></del>			550C_	Not Applicable
Con \$ state   Section   Se	2 40 /	etc.	27 450/D. Thurston	Tr # 2/2	I & Cemposte of Stablis Desired I I I "
20	City & State	EJAA Book FC	City & State	-(	
REYNOLDS, NANCY 4501 N. TANIAM TRAIL, #212 NAPLES FL 33940  11. Pursuant to the provisions of sections 607 6502 and 607 1508, Florida Statutes. the above manned corporation submits Pilis statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, section 607 6505, Florida Statutes. the above manned corporation's bound of directors. Thereby accept the experimental as registered agent. I am familiar with, and accept the obligations of, section 607 6505, Florida Statutes. The above manned corporation's bound of directors. Thereby accept the experimental as registered agent. I am familiar with, and accept the obligations of, section 607 6505, Florida Statutes. The above manned corporation's bound of directors. Thereby accept the experimental as registered agent. I am familiar with, and accept the obligations of, section 607 6505, Florida Statutes. The above manned corporation's bound of directors. Thereby accept the experimental as registered agent. I am familiar with, and accept the obligations of, section 607 6505, Florida Statutes. The above agent. The purpose of changing its registered agent. I am familiar with, and accept the experimental as registered agent. I am familiar with, and accept the experimental as registered agent. I am familiar with, and accept the experimental as registered agent. I am familiar with a papear and familiar with a papear an	24 3370		29 34/03	11/2/	
ASOI N. TAMIAM TRAIL, #212 NAPLES FL 33940  82 Street Address (P.O. Box Number is Not Acceptable)  83 84 City FL 85 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, an adverse the obligations of section 507 0502 and 607 1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, and member with, and accept the obligations of section 507 0505 Florida Statutes.  SIGNATURE Signature, tiped to posted state of florida. Such change was subtractived by the corporation's board of directors. Thurstly accept the appointment as registered dispense of the purpose of changing its registered office or registered agent, and member with a state of florida. Statutes.  SIGNATURE Signature, tiped to posted state of the purpose agent and the illustration of the purpose of changing its registered office of states.  SIGNATURE The purpose of the state of florida Statutes. The above named corporation submits this statement for the purpose of changing its registered office of florida Statutes. Thurstly accept the appointment as registered office of florida Statutes. Thurstly accept the appointment as registered office of florida Statutes. Thurstly accept the corporation's board of directors. Thurstly accept the appointment as registered office or registered or state of florida Statutes. Thurstly accept the corporation's board of directors. Thurstly accept the corporation's board of directors. Thurstly accept the state of the corporation of section of the corporation of such acceptance and the purpose of acceptance and the purpose of directors. Thurstly accept the section of section of the corporation of sections of the corporation of such acceptance and the purpose of director of the corporation of such acceptance and the purpose of sections of section of the corporation of sections of s	beval	<del> </del>	Registered Agent	81 Name	10. Name and Address of New Registered Agent
NAPLES FL 33840    83				<b></b>	Addition (D.O. Day Norther in Not Assessable)
11. Pursuent to the provisions of sections 607.0502 and 607.1508. Findida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Flonda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the objectation of registered agent and object and registered agent and objectation of registered agent and object and registered agent and registered agent and registered agent agent agent and registered agent and registered agent				L.l.	Address (P.O. Box Number is Not Acceptable)
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 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 and accept the obligations of, section 607.0505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CHANGES TO OFFICERS AND OF				83	
SIGNATURE Signature, typed or portland name of mightened agent and lite if applicable in NOTE Registrated Agent signature, recurring when remaining)  DELETE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIME  WALTER, ERNST G  150-153RD AVE. E. STE 2048  INCERTAGORESS  DELETE  21 ITIME  22 NAME  22 NAME  22 STREET ADDRESS  24 CITY ST2P  TIME  MADEIRA BEACH FL 33708  DELETE  21 ITIME  23 TIME  33 TIME  33 TIME  33 TIME  34 CITY ST2P  TIME  MADEIRA BEACH FL 33708  DELETE  24 TIME  34 CITY ST2P  TIME  35 TIME  36 TIME  36 TIME  36 TIME  37 TIME  37 TIME  38 TIME TADDRESS  TIME  37 TIME  38 TIME TADDRESS  TIME  39 TIME  30 TIME  40 TIME  4				84 City	FI 85 Zip Code
DELETE 2 1 ITLE 2 2 SAME 2 2 STREET ADDRESS 2 2 SAME 3 STREET ADDRESS 2 2 STREET ADDRESS 3	office or re		and don nodo, nonder character	, the above-named c	orporation submits this statement for the purpose of changing its registered
DELETE 2 1 ITLE 2 2 SAME 2 2 STREET ADDRESS 2 2 SAME 3 STREET ADDRESS 2 2 STREET ADDRESS 3	SIGNATURE	Ignature, typed or printed name of registered agent	and tille if applicable (NOT	E Registered Agent signalu	e required when re-natating) DATE
TITLE  AUME  2 2 NAME  2 2 NAME  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 4 COUNTY-ST2/P  TITLE  2 1 TITLE  2 1 TITLE  2 3 TITLE  3 1 TITLE  3 1 TITLE  3 1 TITLE  3 TITLE  4 TITLE  5 TITL	SIGNATURE SI	Ignature, typed or printed name of registered agent OFFICERS AND	and tille if applicable (NOT D DIRECTORS	E Registered Agent signalu	e required when re-netating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE  AUME  2 2 NAME  2 2 NAME  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 3 STREET ADDRESS  2 4 COUNTY-ST2/P  TITLE  2 1 TITLE  2 1 TITLE  2 3 TITLE  3 1 TITLE  3 1 TITLE  3 1 TITLE  3 TITLE  4 TITLE  5 TITL	SIGNATURE SI  12.  TITLE NAME	Ignature, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G	and tille if applicable (NOT D DIRECTORS	E Registered Agent signalu	e required when re-netating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS	SIGNATURE SI  12.  TITLE NAME STREET ADDRESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT D DIRECTORS	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 1.3 STREET ADORESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D.R. TOT  Change Addition  ROSGINGE WALTER  1470 D WIF BIND 401 33708
Change   Addition	SIGNATURE  12.  TITLE  NAME  BITREET ADDRESS  CITY-S1-ZIP  TITLE	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 13 STREET ADORESS 14 CITY-ST-ZIP 2 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC  ROSQUERE WALTER 1470 D WIF BIND 401 33708  MMOETRA Re. LIK 34703
INTILE  STREET ADDRESS  CITYST-ZIP  TITLE  AMME  ADELETE  ADELETE  ADELETE  ADITYST-ZIP  DELETE  ADITYST-ZIP  DELETE  ADMINISTREET ADDRESS  CITYST-ZIP  ADDRESS  CITYST-ZIP  DELETE  ADDRESS  CITYST-ZIP  DELETE  ADDRESS  STREET ADDRESS  CITYST-ZIP  DELETE  STRILE  STREET ADDRESS  CITYST-ZIP  DELETE  STRILE  STREET ADDRESS  CITYST-ZIP  DELETE  STREET ADDRESS  CITYST-ZIP  DELETE  STRILE  STREET ADDRESS  CITYST-ZIP  DELETE  STREET ADDRESS  CITYST-ZIP  ADDRESS  CITYST-ZIP  DELETE  STREET ADDRESS  CITYST-ZIP  ADDRESS  CITYST-ZIP  DELETE  STREET ADDRESS  CITYST-ZIP  ADDRESS  CONTROLL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Change  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Addition  Change  Addition  Addi	SIGNATURE  5112.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY.ST-ZIP 2.1 TITLE 2.2 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. RECTOR  ROSAMER WALTER  JY700 WIF BIND 401 33708  MMOERRA BELLIFE SHOOT  -08/20/9801011001
STREET ADDRESS CITY-ST-ZIP TITLE  DELETE  4.1 TITLE  ASTREET ADDRESS CITY-ST-ZIP  AGRICULT ST-ZIP  AGRICULT ST-ZIP  TITLE  ASTREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  4.3 STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  Change Addition Addit	SIGNATURE  5111LE  NAME STREET ADDRESS  CITY-S1-ZIP  DITLE  NAME STREET ADDRESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. RELOT  RESQUERC WASTER  J4700 WIFE Blog 401 33708  MMOERRA BLOG JE 34703  4 CICIOD 26 20 Prograf Addition  -08/20/9801011001
STREET ADDRESS CITY-ST-ZIP  TITLE  DELETE  4.1 TITLE  4.2 NAME  4.2 NAME  4.3 STREET ADDRESS CITY-ST-ZIP  DELETE  DELETE  5.1 TITLE  Change Addition  Addition  Change Addition  Change Addition  Change Addition  Addition  Change Addition  Addition  STREET ADDRESS CITY-ST-ZIP  DELETE  DELETE  5.1 TITLE  Change Addition  Change Addition  Change Addition  Addition  Addition  STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  Addition  ADDRESS CITY-ST-ZIP  Addition  Addition  Addition  Addition  STREET ADDRESS CITY-ST-ZIP  Addition  Additio	SIGNATURE  12.  11ILE  NAME  BITREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC Change Addition  Rosque Whith Blue 401 33708  MINOESKA Re. L./T. 34405  40002520498-01011-001  ****300.00 ****150.00
AME  AME  ANDELETE  A1. TITLE  A2. NAME  A2. NAME  A3. STREET ADDRESS  A1. CITY-ST-ZIP  A4. CITY-ST-ZIP  A5. A1. A1. A1. A1. A1. A1. A1. A1. A1. A1	SIGNATURE  5112.  111LE  VAME STREET ADDRESS CITY-ST-ZIP  111LE  VAME STREET ADORESS CITY-ST-ZIP  111LE  VAME STREET ADORESS CITY-ST-ZIP  111LE  VAME  VAME	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC Change Addition  Rosque Whith Blue 401 33708  MINOESKA Re. L./T. 34405  40002520498-01011-001  ****300.00 ****150.00
### ### ##############################	SIGNATURE  51  12.  111LE  NAME  ETREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  VAME  ETREET ADORESS  ETREET ADORESS  ETREET ADORESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tille if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC Change Addition  Rosque Whith Blue 401 33708  MINOESKA Re. L./T. 34405  40002520498-01011-001  ****300.00 ****150.00
Addition    DELETE   STITILE   Change   Addition	SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  VAME  STREET ADORESS  CITY-ST-ZIP  TITLE  VAME  STREET ADORESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC
TILE  JAME  STREET ADDRESS  STYST-ZIP  STREET ADDRESS  STREET ADDRESS  STYST-ZIP  STREET ADDRESS  STYST-ZIP  STREET ADDRESS  STYST-ZIP  STREET ADDRESS  ST	SIGNATURE  5112.  1171.E  LAME STREET ADDRESS CITY-ST-ZIP  TITLE  LAME STREET ADORESS CITY-ST-ZIP  TITLE  LAME LAME LAME LAME LAME LAME	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC
STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS 54 CITY-ST-ZIP  61 TITLE 62 NAME 62 NAME 63 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 supplemental annual report is true and accounted 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 of the receiver or furcetive or give seever or furcetive receiver	SIGNATURE  51 12.  111LE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADORESS  CITY-S1-ZIP  TITLE  VAME  STREET ADDRESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE	E Registered Agent signalu  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. R. LOC
STREET ADDRESS 64 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 of the receiver or furcieve or greeiver or greeive	SIGNATURE  12.  11ILE  NAME  BITREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADORESS  CITY-S1-ZIP  TITLE  VAME  BITREET ADORESS  CITY-S1-ZIP	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE  DELETE	E Registered Agent signalu  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 4.3 STREET ADDRESS 44 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D.R. LOC Change Addition  Rasquele Wilter  HIDD 2520 Frage Addition  4000 2520 Frage Addition  -08/20/98-01011-001  ****300.00 ****150.00  Change Addition
THE DELETE 61TITLE 62 NAME 62 NAME 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 TREET ADDRESS 64 CITY-ST-ZIP 66 TREET ADDRESS 64 CITY-ST-ZIP 67 TREET ADDRESS 64 CITY-ST-ZIP 68 TREET ADDRESS 64 CITY-ST-ZIP 69 TREET ADDRESS 64 CITY-ST-ZIP 69 TREET ADDRESS 64 CITY-ST-ZIP 60 TREET ADDRESS 64 CITY-ST-ZIP 60 TREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP 65 TREET ADDRESS 64 CITY-ST-ZIP 65	SIGNATURE  51 12.  111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADORESS CITY-ST-ZIP TITLE VAME VAME VAME	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE  DELETE	E Registered Agent signalu  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D.R. LOC Change Addition  Rasquele Wilter  HIDD 2520 Frage Addition  4000 2520 Frage Addition  -08/20/98-01011-001  ****300.00 ****150.00  Change Addition
62 NAME 63 STREET ADDRESS 64 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 of the receiver or furcieve or given by the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or furcieve or given by the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or furcieve or given by the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or furcieve of the same appears.	SIGNATURE  51 12.  111LE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE VAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	and tile if applicable (NOT ) DIRECTORS  DELETE  DELETE  DELETE	E Registered Agent signalus 13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D.R. LOC Change Addition  Rasquele Wilter  HIDD 2520 Frage Addition  4000 2520 Frage Addition  -08/20/98-01011-001  ****300.00 ****150.00  Change Addition
64 City-S1-ZiP 64 City-S1-ZiP 9 64 City-	SIGNATURE  12.  111LE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	D DIRECTORS DELETE DELETE DELETE DELETE	E Registered Agent signalu  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Director
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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears	SIGNATURE  12.  111LE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	D DIRECTORS DELETE DELETE DELETE DELETE	E Registered Agent signals  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 4.3 STREET ADDRESS 4. CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Director
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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears	SIGNATURE  12.  111LE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	organium, typed or printed name of registered agent OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048	D DIRECTORS DELETE DELETE DELETE DELETE	E Registered Agent signals  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 STREET ADDRESS 64 STREET ADDRESS 64 STREET ADDRESS 65 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Director
In Block 12 or Block 13 if changed, or on attachment with an address	SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADORESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS AND P WALTER, ERNST G 150-153RD AVE. E. STE 2048 MADEIRA BEACH FL 33708	D DIRECTORS DELETE DELETE DELETE DELETE DELETE	E Registered Agent signals  13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 54 CITY-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  D. Rector

## Reynolds SASSOCIATES, P.A.

PJ)

Nancy K. Reynolds, CPA

2

July 20, 1998

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir:

In February 1998, my office mailed completed Corporate Annual Reports and payments for Serco America Corporation and Serfico Investments. Apparently, these items were lost in the mail. I would like to request a waiver of the penalties, as we did file the reports, but through no fault of our own, never made it to your office. I have enclosed copies of the original checks, original reports and a new check in the amount of \$300 (\$150 for each filing) and new Corporate Annual Reports.

Sincerely,

Ed Rush Accountant