FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 19 AM 10:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P94000076718 (3)

1. Corporation Name

ATROPOS, INC.

Principal Place of Business: 310 RAVEN STREET TALLAHASSEE FL 32303

Mailing Address: 310 RAVEN STREET TALLAHASSEE FL 32303

3. Date Incorporated or Qualified: 10/19/1994

3a. Date of Last Report: FIRST REPORT

4. FEI Number: 59-32-736669 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under S. 199.032 Florida Statutes [ ] Yes [X] No

2. Principal Place of Business

21: 652 W Tennessee St

22: Suite, Apt. # etc.

23: City & State: Tallahassee, FL

24: Zip: 32304

25: Country: U.S.

2a. Mailing Address

26: P.O. BOX 10335

27: Suite, Apt. # etc.

28: City & State: Tallahassee, FL

29: Zip: 32302

30: Country: U.S.

9. Name and Address of Current Registered Agent

TORRES, JAVIER O
2001 BELLE VUE WAY
#66
TALLAHASSEE FL 32304

10. Name and Address of New Registered Agent

81 Name

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 617.0502, 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

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Title	Name / Street Address / City-St-Zip	Change	Addition
P.	JAVIER TORRES, 2001 BELLE VUE WAY #66, TALLAHASSEE, FL 32304	[ ]	[X]
V.	MATTEW WEST, 1411-B Ramble Brook, Tallahassee, FL	[ ]	[X]
T/D	MICHAEL LILLY, 2723 Blairstone Lane, Tallahassee, FL 32301	[ ]	[X]
		[ ]	[ ]
		[ ]	[ ]
		[ ]	[ ]

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 report or supplemental 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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-17-95 904-509-2151

0408618 FP