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

PROFIT CORPORATION ANNUAL REPORT

1998

N PRT FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000088993 (8)

DEV INVEST COMPANY

j

FILED
Mar 02 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address **% J. BENNETT GROCOCK** % J. BENNETT GROCOCK 126 E. JEFFERSON ST. 126 E. JEFFERSON ST. DO NOT WRITE IN THIS SPACE ORLANDO FL 32901 ORLANDO FL 32801 3. Date Incorporated or Qualified 12/08/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 21 59-3281667 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution Added to Fees 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name GROCOCK, J. BENNETT 126 EAST JEFFERSON ST. Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32801 83 84 City Zip Code 85 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE **ELKOUB, ANTHONY** 1.2 NAME NAME SG RUE RAFFET 75016 STREET ADDRESS 1.3 STREET ADDRESS PARIS FR 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP City+SI-ZiP DELE 1E Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP DELETE Addition 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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: Turther 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 logar 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 phapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an allochment with an address

SIGNATURE:

alulas