

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

FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000091247 1. Corporation Name COLLEONI DI AMERICA CORPORATION			
Principal Place of Business		Mailing Address	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business		3. Date Incorporated or Qualified	
21 711 Indiantown Road West		12/05/1994	
22 Suite A1		4. FEI Number	
23 Jupiter, FL		65-0541912	
24 33458		5. Certificate of Status Desired	
25 USA		6. Election Campaign Financing	
26 33458		7. This corporation owes or has paid the current year intangible	
27 USA		8. Personal Property Tax due June 30.	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Zlanabitnig, Erich 711 Indiantown Rd. Suite A1 Jupiter, FL 33458 US		81 Name Alan J. Ciklin, Esq. 82 Street Address (P.O. Box Number is Not Acceptable) 515 North Flagler Drive 83 Suite 1700 84 City West Palm Beach 85 Zip Code FL 33401	
11. Pursuant to the provisions of Sections 607.0505 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: <i>[Signature]</i> ; Alan J. Ciklin, Registered Agent January 19, 1998			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. TITLE PTD NAME Kolbel, Peter STREET ADDRESS 3793 Cape Pointe Circle CITY-STATE-ZIP Jupiter, FL 33477		1.1 TITLE S 1.2 NAME Lupsic, Alexander 1.3 STREET ADDRESS 3793 Cape Pointe Circle 1.4 CITY-STATE-ZIP Jupiter, FL 33477	
2. TITLE S NAME Zlanabiting, Erich STREET ADDRESS 711 W. Indiantown Road, Suite A3 CITY-STATE-ZIP Jupiter, FL		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP	
3. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP	
4. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP	
5. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP	
6. TITLE NAME STREET ADDRESS CITY-STATE-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-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 as an attachment with an address.		200002435272 -02/19/98-01027-034 ***150.00	
SIGNATURE: <i>[Signature]</i> ; Peter Kolbel, President 2/11/98 (561)745-1308			

CR2E034 (10/97)