

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

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000049839 (0)

1. Corporation Name

THE NEXT GENERATION FOUNDATION, INC.

Principal Place of Business
3590 NW 54TH ST SUITE 6
FT LAUDERDALE FL 33309

Mailing Address
3590 NW 54TH ST SUITE 6
FT LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3590 NW 54 ST.	26	3590 NW 54 ST	06/27/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	9	27	9	65-0593237	
City & State		City & State		Applied For	
23	FT. LAUDERDALE FL	28	FT LAUDERDALE FL	Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24	33309	29	33309	<input type="checkbox"/> \$8.75 Additional Fee Required	
Country		Country		6. Election Campaign Financing	
25	US	30	US	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

MCCARTNEY, SHARI L
600 S ANDREW AVE
STE 503
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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, 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)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	MCCARTNEY, SHARI L
NAME	MCCARTNEY, SHARI L	1.2 NAME	P.O. Box 030343
STREET ADDRESS	600 S ANDREWS AVE STE 503	1.3 STREET ADDRESS	FT. LAUDERDALE FL 33303
CITY-ST-ZIP	MIAMI BEACH FL 33139	1.4 CITY-ST-ZIP	N/A
TITLE	D	2.1 TITLE	JAMES MCCARTNEY JAMES I
NAME	MCCARTNEY, JAMES I	2.2 NAME	3590 NW 54 ST SUITE 9
STREET ADDRESS	3590 NW 54TH ST SUITE 6	2.3 STREET ADDRESS	FT LAUDERDALE FL 33309
CITY-ST-ZIP	FT LAUDERDALE FL 33309	2.4 CITY-ST-ZIP	MCCARTNEY, MICHELLE
TITLE	D	3.1 TITLE	3590 NW 54 ST SUITE 9
NAME	MCCARTNEY, MICHELLE	3.2 NAME	FT LAUDERDALE FL 33309
STREET ADDRESS	3590 NW 54TH ST SUITE 6	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33309	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 change or on an attachment with an address.

SIGNATURE:

J. McCartney J. MCCARTNEY

11/8/98 9547335105

CR2E034 (10/97)