


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

FILED
May 11 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 # P95000078036 (7) 1. Corporation Name ANUM ASSOCIATES, INC.		

Principal Place of Business 7255 SOLANDRA LN. TAMARAC FL 33321	Mailing Address 7255 SOLANDRA LN. TAMARAC FL 33321
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CHANGE OF ADDRESS:-

2. Principal Place of Business 21 10833 - NW - 46 th DR. Suite, Apt. #, etc. 22 City & State 23 CORAL SPRING. Zip 24 FL-33096	2a. Mailing Address 25 10833 - NW - 46 th Dr. Suite, Apt. #, etc. 27 City & State 28 CORAL SPRING. Zip 29 FL-33096	Country 25 U.S.A. 30 U.S.A.
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/10/1995	4. FEI Number 65-0615041	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing 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 RAJWANI, AMIR A 7255 SOLANDRA LN. TAMARAC FL 33321	10. Name and Address of New Registered Agent 81 Name - SAME - 82 Street Address (P.O. Box Number is Not Acceptable) 83 10833 - NW - 46 th DRIVE 84 City CORAL SPRING. FL 85 Zip Code 33096
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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 *Amir A Rajwani* (DIRECTOR) (AMIRALI. RAJWANI) 4-29-98.
Signature, typed or printed name of registered agent (and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE	<input type="checkbox"/> DELETE
NAME	D RAJWANI, AMIR A
STREET ADDRESS	7255 SOLANDRA LN.
CITY-ST-ZIP	10833 - NW - 46 th Dr. CORAL SPRING FL-33096
TITLE	<input type="checkbox"/> DELETE
NAME	D RATAANI, AMYN
STREET ADDRESS	603-2 FLORES AVE
CITY-ST-ZIP	LOREDO TX
TITLE	<input type="checkbox"/> DELETE
NAME	D RAJWANI, ANISA
STREET ADDRESS	7255 SOLANDRA LANE
CITY-ST-ZIP	10833 - NW - 46 th Dr. CORAL SPRING FL-33096
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 changed, or on an attachment with an address.

SIGNATURE *Amir A Rajwani* (AMIRALI. RAJWANI) 4/29/98. (954) 724-1718.

CR2E034 (10/97)