

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000078302 (3)
 1. Corporation Name
INRC INVESTMENT CORP.



Principal Place of Business 150 W. FLAGLER STREET SUITE 2200 MIAMI FL 33130	Mailing Address 150 W. FLAGLER STREET SUITE 2200 MIAMI FL 33130
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 401 W. LINTON BLVD. Suite, Apt. #, etc. 22 City & State 23 DELRAY BEACH, FLORIDA Zip Country 24 33444 25 USA	2a. Mailing Address 26 401 W. LINTON BLVD. Suite, Apt. #, etc. 27 City & State 28 DELRAY BEACH, FLORIDA Zip Country 29 33444 30 USA
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3. Date Incorporated or Qualified 10/11/1995	4. FEI Number 65-0609386	Applied For <input type="checkbox"/> 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
~~FREED, OWEN S~~
~~150 W. FLAGLER STREET~~
~~SUITE 2200~~
MIAMI FL 33130

10. Name and Address of New Registered Agent
 81 Name **MAURIZIO LUCA**
 82 Street Address (P.O. Box Number is Not Acceptable)
3025 ST. JAMES DRIVE
 83
 84 City **BOCA RATON** FL 85 Zip Code **33434**

11. Pursuant to the provisions of Sections 607.01(2) and 607.11(8), 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, Sections 607.05(5), Florida Statutes.
 SIGNATURE: *Maurizio Luca* DATE: **3-5-98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	LUCA-MORETTI, MAURIZIO DR.	1.2 NAME	
STREET ADDRESS	3025 ST. JAMES DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33434	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	
NAME	LUCA, ANNA	2.2 NAME	
STREET ADDRESS	3025 ST JAMES DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL	2.4 CITY-ST-ZIP	
TITLE	AS	3.1 TITLE	
NAME	FREED, OWEN S	3.2 NAME	
STREET ADDRESS	150 W. FLAGLER STREET, SUITE 2200	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33130	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 reports 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 in an attachment with an address.
 SIGNATURE: *Maurizio Luca* DATE: **3-5-98** (56) **265-3333**

CFR2034 (10/97)