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Apr 29 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000084241 (5)

1. Corporation Name

PHILLIPS GROUP, INC.

Principal Place of Business

3355 PINEWALK DR N APT 108
MARGATE FL 33063

Mailing Address

3355 PINEWALK DR N APT 108
MARGATE FL 33063-7830



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 545 BAYSHORE DR.		26 545 BAYSHORE DR.		10/30/1995		04/16/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 # 5		27 # 5		65-0623644		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 Ft. Lauderdale, FL		28 Ft. Lauderdale, FL		6. Election Campaign Financing		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		Trust Fund Contribution		<input type="checkbox"/>	
24 33304		29 33304		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Country		Country					
25 USA		30 USA					

9. Name and Address of Current Registered Agent

PHILLIPS, JUDITH A
3355 PINEWALK DR N APT 108
MARGATE FL 33063

10. Name and Address of New Registered Agent

81 Name Judith A. PHILLIPS
82 Street Address (P.O. Box Number is Not Acceptable) 545 BAYSHORE DR.
83 # 5
84 City Ft. LAUDERDALE FL 85 Zip Code 33304

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 Judith A. PHILLIPS Date 4-21-97
Signature typed or printed name of registered agent and title if applicable. (NOT IF Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	P
NAME	PHILLIPS, JUDITH A	1.2 NAME	PHILLIPS, JUDITH A.
STREET ADDRESS	3355 PINEWALK DR. NO. #108	1.3 STREET ADDRESS	545 BAYSHORE DR. #5
CITY-ST-ZIP	MARGATE FL 33063	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
TITLE	V	2.1 TITLE	V
NAME	PHILLIPS, CHARLES E	2.2 NAME	PHILLIPS, CHARLES E.
STREET ADDRESS	3355 PINEWALK DR. NO. #108	2.3 STREET ADDRESS	545 BAYSHORE DR. #5
CITY-ST-ZIP	MARGATE FL 33063	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL 33304
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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 do 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:

Judith A. PHILLIPS
Signature typed or printed name of signing officer or director

4-21-97

Date

(954) 561-8341

Daytime Phone #

0145883

CR2E034 (9/96)