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PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000092294 (4)

FILED Jan 27 1998 8:00am Secretary of State

Principal Place of Business  402 APPELROUTH LANE KEY WEST FL 33040  Applied For Suite, Apt. #, etc.  21 Suite, Apt. #, etc.  22 Size Apt. #, etc.  23 State  City & State  City & State  25 State  City & State  City & State  Applied For Country  Applied For Country  Applied For Status Desired  5. Certificate of Status Desired  Fee Required  Trust Fund Contribution  Added to Fees  \$5.00 May Be  Added to Fees  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Applied For Status Desired  Fee Required  Sp. On May Be  Added to Fees  Sp. Name and Address of Current Registered Agent  BROWNING, MICHAEL  402 APPELROUTH LANE  KEY WEST FL 33040	For plicable ponal d
KEY WEST FL 33040  KEY WEST FL 33040  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified 12/05/1995  2. Principal Place of Business  2a. Mailing Address  4. FEI Number  65-0621981  Not Applied For 65-0621981  Suite. Apt. #, etc.  25  City & State  City & State  City & State  26  City & State  City & State  27  Country  28  Country  29  29  30  Country  30  Personal Property Tax due June 30. Yes No	onal d Be
3. Date Incorporated or Qualified 12/05/1995  2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0621981 Not Applied For 85-0621981 Not Applied For 95-0621981 Suite, Apt. #, etc. 97 City & State City & State City & State 28 City & State 29 Country 29 Country 30 Suite, Apt. #, etc. 29 30 Suite, Apt. #, etc. 20 Country 30 Suite, Apt. #, etc. 30 Suite, Apt. #, etc. 40 Suite, Apt. #, etc. 50 Suite, Apt. #, etc. 51 Sertificate of Status Desired Fee Required	onal d Be
2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. Country 2. Description owes or has paid the current year Intangible Personal Property Tax due June 30. Personal Property Tax due Agent  BROWNING, MICHAEL 402 APPELROUTH LANE KEY WEST FL 33040  28 Applied For Applied For 65-062 1981  Country 5. Certificate of Status Desired	onal d Be
2. Principal Place of Business 2. Mailing Address 3. Mailing Address 4. FEI Number 65-0621981  Not Applied For Solite. Apt. #, etc. 5. Certificate of Status Desired 5. Certificate of Status Desired Fee Required  6. Election Campaign Financing Trust Fund Contribution Added to Fees  Zip Country 2ip Country 2ip Country 3. This corporation owes or has paid the current year Intanglible Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  BROWNING, MICHAEL 402 APPELROUTH LANE KEY WEST FL 33040	onal d Be
Suite. Apt. #, etc.    Suite. Apt. #, etc.     Suite.	onal d Be
22   27   5. Certificate of Status Desired   Fee Required	d Be
City & State   City & C	Be os
Trust Fund Contribution Added to Fees  Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes No  9. Name and Address of Current Registered Agent  BROWNING, MICHAEL 402 APPELROUTH LANE KEY WEST FL 33040  Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Personal Proper	es
Zip Country Zip Country Sip Country Sip Country Sip Country Sip Country Sip Country Sip	
24 25 29 30 Personal Property Tax due June 30.  Yes No  9. Name and Address of Current Registered Agent  BROWNING, MICHAEL  402 APPELROUTH LANE  KEY WEST FL 33040  Personal Property Tax due June 30.  Yes No  10. Name and Address of New Registered Agent  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)	le
9. Name and Address of Current Registered Agent  BROWNING, MICHAEL  402 APPELROUTH LANE  KEY WEST FL 33040  10. Name and Address of New Registered Agent  Name  82 Street Address (P.O. Box Number is Not Acceptable)	
BROWNING, MICHAEL 402 APPELROUTH LANE KEY WEST FL 33040  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)	
402 APPELROUTH LANE KEY WEST FL 33040  Street Address (P.O. Box Number is Not Acceptable)	<u> </u>
KEY WEST FL 33040	
	- [
84 City 85 Zip Code	
FL   FL   FL   FL   FL   FL   FL   FL	
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 register office or registered agent, or pot, 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.	stered ered
agent. I am familiar with, and accept the obligations of section 607,0505, Florida Statutes.	
SIGNATURE	
Signature, type 3 printed from 60 together define the policeble. (NOTE: Registered Agent signature required when reinstating)  12. OFFICERS AND DIRECTORS IN 12	12
	Addition
NAME BROWNING, MICHAEL 12 NAME	:
STREET ADDRESS 402 APPELROUTH LANE 1.3 STREET ADDRESS	
CITY-ST-ZIP KEY WEST FL 33040	
	Addition
NAME SIRECI, THOMAS 2.2 NAME	
STREET ADDRESS 402 APPELROUTH LANE 2.3 STREET ADDRESS 2.3 STREET ADDRESS	
CITY-ST-ZIP KEY WEST FL 33040 2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE Change Addit	Addition
NAME KLITENICK, RICHARD 3.2 NAME	ļ
STREET ADDRESS 402 APPELROUTH LANE 3.3 STREET ADDRESS	1
CITY-ST-ZIP KEY WEST FL 33040 34. CITY-ST-ZIP	
TITLE D DELETE 4.1 TITLE Change Addit	Addition
NAME THOMPSON, JAMES T 4.2 NAME	1
STREET ADDRESS 402 APPELROUTH LN 4.3 STREET ADDRESS	1
CITY-ST-ZIP KEY WEST FL 33040 44 CITY-ST-ZIP	
NAME 52 NAME	Addition
STREET ADDRESS 5.3 STREET ADDRESS	Addition
CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.4 TITE 6.4	Addition
TO A MARKET	Addition Addition
NAME 6.2 NAME	
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 suppliemental 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 of the receiver of trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 or Block 13 if chapter down an attinchment with an address.

SIGNATURE:

1/15/98 (305)2938888