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

CORPORATION **ANNUAL REPORT** 1998 DOCUMENT # ELYSE A. NELSON, INC. Principal Place of Business 351 SE 5TH COURT POMPANO FL 33060 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 25 2843 THAXTON DR. PALM HARBOR FL 34684

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 18 1998 8:00am Secretary of State

P95000095552 (2) Mailing Address 351 SE 5TH COURT POMPANO FL 33060 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/18/1995 4. FEI Number 2a. Mailing Address Applied For 65-0627324 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6, Election Campaign Financing Trust Fund Contribution Added to Fees 28 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FINANCIAL FOUNDATIONS 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 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, typod or presided name of registering again and that if applicable (NOTE Registered Agont signature required when reinstating) (10/97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition TITLE 1.1 TITLE **NELSON, ELYSE** MAME 1.2 NAME CR2E034 351 SE 5TH COURT 1.3 STREET ADDRESS STREET ADDRESS POMPANO FL 33060 CITY-ST-ZIP 1.4 CITY - S1 - 2IP DELETE Change Addition TITLE 2.1 TITLE **NELSON, GREGORY** NAME 22 NAME 351 SE 5TH COURT STREET ADDRESS 2 3 STREET ADDRESS POMPANO FL 33060 CITY-ST-ZIP 2. 4 CITY - S1 - ZIP DELETE TITLE Change Addition 3.1 III/F **NELSON, GREG** NAME 3.2 NAME 351 SE 5TH COURT STREET ADDRESS 3.3 STREET ADDRESS POMPANO FL 33060 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-71P 4.4 CITY - ST-ZIP DELETE Change Addition TETLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 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 trusted emphasized my wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed 10 or an implement with an address.

EDITAKAN

4-28-98