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Mailing Address

2223 S.E. KANNER HIGHWAY

STUART FL 34994-4619

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

2223 S.E. KANNER HIGHWAY

STUART FL 34994



ELORIDA DEPARTMENT DE STATE

FILED

Apr 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000012066 (2)

ECCO - REAL ESTATE INVESTMENTS, INC.

14. I do hereby certify that the information supplied with this fi

appears in Block 12 or Block 13 if changed, or on a

SIGNATURI

3. Date Incorporated or Qualified 3a. Date of Last Report 02/05/1996 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 Not Applicable Suite, Apl. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 **Trust Fund Contribution** Added to Fees Ζip Country 8. This corporation has liability for intagible tax under s. 199.032 Yes No 24 30 Florida Statutes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BEHNKE, GERD V 2223 S.E. KANNER HWY. Street Address (P.O. Box Number is Not Acceptable) STUART FL 34994 83 84 City 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 reg stered 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change Addition BEHNKE, GERD V NAME 1.2 NAME 2223 S.E. KANNER HWY. STREET ADDRESS 1.3 STREET ADDRESS STUART FL 34994 CITY-ST-ZIP 1.4 CITY-SY-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CHY-S1-2IP DELETE Change Addition THTLE 3.1 TITLE NAMÉ 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CHY-57-7IP 3.4. CITY-ST-7/P DELETE ___ Addition TITLE 4.1 TITLE NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-ZIP 4.4 CITY-ST-ZIP __ DELETE Change Addition THILE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST- ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CHY-ST-ZIP 6.4 CITY-ST-ZIP

I do hereby certify that the information supplied with this filling 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 legality in trustee empowered to exempte this report as required by Chapter 607, Florida Statutes; and that my name