

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998
 ACCOUNT DUE ON OR BEFORE 9/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE \$750)

PROFIT CORPORATION ANNUAL REPORT 1998



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

FILED
 May 13, 1999 8:00 am
 Secretary of State

05-13-1999 90016 009 ***150.00

DOCUMENT # P96000012069 (6)

Corporation Name

ERDA, INC. ✓



Principal Place of Business
 WAVECREST
 ONE NORTH BREAKERS ROW
 PALM BEACH FL 33480

Mailing Address
 481 WAVECREST
 ONE NORTH BREAKERS ROW
 PALM BEACH FL 33480

PLEASE WRITE IN THIS SPACE

Date Incorporated or Qualified 02/08/1986		Applied For Not Applicable	
4. FEI Number 85-0847111 ✓		Additional Fee Required \$8.75	
5. Institute of Status Desired <input type="checkbox"/>		Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
6. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input type="checkbox"/> No		7. Name and Address of New Registered Agent	
Principal Place of Business 26 1/8 Barry P. Pinciss		27 One N. Breakers Row, #481	
City & State 28 Palm Beach FL		29 33480	
Country 29 USA		30	
8. Name and Address of Current Registered Agent PINCISS, BARRY P 481 WAVECREST ONE NORTH BREAKERS ROW PALM BEACH FL 33480		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83.	
		84. City	
		88. Zip Code	

Pursuant to the provisions of sections 607.0602 and 607.1308, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of 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 607.0603, Florida Statutes.

SIGNATURE		DATE	
Signature, typed or printed name of registered agent and title if applicable		Registered Agent signature required when terminating	
OFFICERS AND DIRECTORS		ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
0	<input type="checkbox"/> DELETE	1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1	PINCISS, BARRY P	1.1	TITLE
2	481 WAVECREST - ONE NORTH BREAKERS ROW	1.2	NAME
3	PALM BEACH FL 33480	1.3	STREET ADDRESS
4		1.4	CITY-ST-ZIP
5	<input type="checkbox"/> DELETE	2.1	TITLE
6	WARSHAVER, JOANNE	2.2	NAME
7	481 WAVECREST - ONE NORTH BREAKERS ROW	2.3	STREET ADDRESS
8	PALM BEACH FL 33480	2.4	CITY-ST-ZIP
9	<input type="checkbox"/> DELETE	3.1	TITLE
10		3.2	NAME
11		3.3	STREET ADDRESS
12		3.4	CITY-ST-ZIP
13	<input type="checkbox"/> DELETE	4.1	TITLE
14		4.2	NAME
15		4.3	STREET ADDRESS
16		4.4	CITY-ST-ZIP
17	<input type="checkbox"/> DELETE	5.1	TITLE
18		5.2	NAME
19		5.3	STREET ADDRESS
20		5.4	CITY-ST-ZIP
21	<input type="checkbox"/> DELETE	6.1	TITLE
22		6.2	NAME
23		6.3	STREET ADDRESS
24		6.4	CITY-ST-ZIP

I hereby certify that the information furnished on this filing does not qualify for the exemption stated in section 119.07(3)(b), Florida Statutes. I further certify that the information submitted on this 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; and that I understand the requirements to ensure that report as required by Chapter 607, Florida Statutes; and that my name appears in block 12 of this report.

SIGNATURE *Barry P. Pinciss* 4/2/99 90121-0011