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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000023625 (2)

ASSET COURIER SERVICE INC.

FILED Mar 10 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 123 E. RIVERSIDE DR. 123 E. RIVERSIDE DR. **TEOUESTA FL 33469** TEQUESTA FL 33469 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/12/1996 2. Principal Place of Business Applied For 2550 Canterbury Dr. P.O. Box 30775 21 65-0663364 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 33420 W.P.B. Added to Fees Trust Fund Contribution Country Country 8. This corporation owes or has paid the current year Intangible Palm Yes □ No Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MONTRY, CLIFFORD W. 127 HERITAGE WAY Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33407 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 SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS IN 12 13. X DELETE TITLE 11 TITLE MONTRY, ANGELLA NAME 1.2 NAME Michael T. 2550 Canter 123 E RIVERSIDE DR STREET ADDRESS 1.3 STREET ADDRESS 33407 **TEQUESTA FL 33469** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELFTE Change Addition TITLE 21 TITLE MONTRY, MICHAEL T. NAME 2.2 NAME South 123 E RIOVERSIDE DR 2.3 STREET ADDRESS STREET ADDRESS **TEQUESTA FL 33469** 2 4 CITY - ST-2IP CITY-ST-ZIP DELFTE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5 2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 THLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 eath; 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 any ittachment with an address.

SIGNATURE: Visit February Michael T. Montry President 02/25/98