

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Apr 14 1998 8:00am  
Secretary of State

DOCUMENT # P96000037465 (7)

1. Corporation Name  
BUYMART.COM, INC.



Principal Place of Business  
612 BELLE ISLE AVENUE  
BELLEAIR BEACH FL 33786  
US

Mailing Address  
612 BELLE ISLE AVENUE  
BELLEAIR BEACH FL 34634

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/30/1996	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3377707	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Zip	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
DAVIS, JAMES R JR. 612 BELLE ISLE AVENUE BELLEAIR BEACH FL 33786		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 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 *James R. Davis, Jr.* JAMES R. DAVIS, JR. PRESIDENT DATE 04-08-98  
(NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, JAMES R JR.	1.2 NAME	
STREET ADDRESS	612 BELLE ISLE AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	BELLEAIR BEACH FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, MARCIA E	2.2 NAME	
STREET ADDRESS	612 BELLE ISLE AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BELLEAIR BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, ROBERT SCOTT	3.2 NAME	
STREET ADDRESS	230 JAY STREET, APT. 8-G	3.3 STREET ADDRESS	
CITY-ST-ZIP	BROOKLYN NY 11201	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVENS, ALLEN L	4.2 NAME	
STREET ADDRESS	585 OLD STAMFORD ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW CANAAN CT	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVERS, MARCIA	5.2 NAME	
STREET ADDRESS	11863 RAINTREE DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 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 an attachment with an address.

SIGNATURE *James R. Davis, Jr.* JAMES R. DAVIS, JR. PRESIDENT DATE 04-08-98 813-593-3754

CR2E034 (10/97)