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May 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000038694 (1)

1. Corporation Name
FANTASY TAN, INC.

Principal Place of Business

610 SANTA MARIA DRIVE
TIERRA VERDE FL 33715

Mailing Address

610 SANTA MARIA DRIVE
TIERRA VERDE FL 33715-2013

3. Date Incorporated or Qualified

05/03/1996

3a. Date of Last Report

2. Principal Place of Business

21 2653 ULMERTON RD.

Suite, Apt. #, etc.

2a. Mailing Address

26 2653 ULMERTON RD.

Suite, Apt. #, etc.

4. FEI Number

59-3377156

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032.
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

PUNZAK, DAVID R
200 CENTRAL AVENUE
SUITE 2000
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
TORGUSEN, ROBERT
610 SANTA MARIA DR.
TIERRA VEDRA FL 33715

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
FIRTH, WILLIAM D
610 SANTA MARIA DR.
TIERRA VEDRA FL 33715

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE P/D Change Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE v/s/t/d Change Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

25 CITY-ST-ZIP

31 TITLE Change Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE Change Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE Change Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE Change Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do 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

Robert Torgusen, President

CR2E034 (9/96)