

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

<p>PROFIT CORPORATION ANNUAL REPORT 1998</p>		<p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>
<p>DOCUMENT # P96000063418 (3)</p>		
<p>1. Corporation Name PROTOKORE, INC.</p>		

<p>Principal Place of Business 2275 ATLANTIC BLVD NEPTUNE BEACH FL 32266</p>		<p>Mailing Address 2275 ATLANTIC BLVD NEPTUNE BEACH FL 32266</p>
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FILED
Mar 12 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

<p>2. Principal Place of Business 21</p>		<p>2a. Mailing Address 26</p>		<p>3. Date Incorporated or Qualified 07/30/1996</p>	
<p>Suite, Apt. #, etc. 22</p>		<p>Suite, Apt. #, etc. 27</p>		<p>4. FEI Number 59-3344777</p>	
<p>City & State 23</p>		<p>City & State 28</p>		<p>5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</p>	
Zip 24	Country 25	Zip 29	Country 30	<p>6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees</p>	
<p>7. Name and Address of Current Registered Agent SORRELL, MARY C 2275 ATLANTIC BLVD NEPTUNE BEACH FL 32266</p>				<p>8. 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</p>	
				<p>10. Name and Address of New Registered Agent</p>	
				<p>81 Name FL</p>	85 Zip Code
				<p>82 Street Address (P.O. Box Number is Not Acceptable)</p>	
				<p>83</p>	
				<p>84 City</p>	

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

<p>12. OFFICERS AND DIRECTORS</p>		<p>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</p>	
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE PD HIONIDES, CHRIS 2275 ATLANTIC BLVD NEPTUNE BEACH FL 32266</p>	<p>1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP</p>	<p>P/T/S/O</p>
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE S SORRELL, MARY C 2275 ATLANTIC BLVD NEPTUNE BEACH FL</p>	<p>2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE VPD HIONIDES, NADIA 2275 ATLANTIC BLVD NEPTUNE BEACH FL</p>	<p>3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE</p>	<p>4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP</p>	<p>Asst. Secretary Tera J. Mortham 2275 Atlantic Boulevard Neptune Beach, FL 32266</p>
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE</p>	<p>5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>
<p>TITLE NAME STREET ADDRESS CITY-ST-ZIP</p>	<p><input type="checkbox"/> DELETE</p>	<p>6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP</p>	<p><input type="checkbox"/> Change <input type="checkbox"/> Addition</p>

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 supplement to 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:

Chris Hionides

3/6/98 (904) 241-1501

CR2E034 (10/97)