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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000068898 (1)

ALTERIA, INC.

Principal Place of Business Mailing Address 11 AVENUE DE LA MER LA GRANDE 11 AVENUE DE LA MER LA GRANDE **STE 1106** STE 1106 PALM COAST FL 32137 PALM COAST FL 32137-2258 3. Date Incorporated or Qualified 3a. Date of Last Report 08/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable Suite Apr. # 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 23 Trust Fund Contribution Added to Fees Zio Country Ζφ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Yes No 25 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CAROTENUTO, MARY 3000 GULF TO BAY BLVD. STE 206 82 Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34619** 83 Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Ses area. Aspect or preced name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE Change Addition 11 TITLE MAYO, GENE NAMI 1.2 NAME 11 AVENUE DE LA MER LA GRANDE PROVANCE STREET ADDRESS 1.3 STREET ADDRESS PALM COAST FL 32137 0114 - 51 1.4 CITY-ST-ZIP DELETE Change Addition Till, F 21 TITLE NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CITY-ST-ZIP DELETE 100 31 TITLE Change Addition NAME 32 NAME STREET ADDRESS 33 STREET ADDRESS CITY 51-76 34. CITY-ST-ZIP DELETE Change Till, F 4.1 TITLE Addition NAM 4.2 NAME

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 authorities and dress.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

51 TITLE

52 NAME

6 1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CHTY - ST - ZIP

CITY - 51 - 70F

TILL

NAME

DILE NAME

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

Daytimo Prione #

Change

Change

Addition

Addition

FILED

Apr 25 1997 8:00am

Secretary of State