SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Jul 29 1998 8:00am Secretary of State

	1998	DIVISION OF	CORPORATIONS	Scorcial	y or state	
DOCUMENT # P96000069560 (6)						
F. M. SE	COURITIES, INC.			•	4	
			· - - · · · · · · · · · · · · · · · · · ·			
Principal Place	e of Business	Mailing Address		4 10011001 1/4 10110 Bittl Spirt 441/1 041/1	ABIIA BIIIA IRIAI ANNA BIIN ABII 1881	
167 YACHT CLUB WAY #201 167 YACHT CLUB WAY #201			201			
HYPOLUXO FL 33462 HYPOLUXO FL 33462				DO NOT WRITE IN	THIS SPACE	
				3. Date Incorporated or Qualified 08/21/1996		
2. Principal Place of Business 2a.		2a. Mailing Address	· · · · · · -	4. FEI Number	Applied For	
21		26		65-0697261	Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the		
24	25	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No	
9. Name and Address of Current Registered Agent MONCHER, FRED A 167 YACHT CLUB WAY #201 R2 Street Address				IO. Name Bild Address of New Registe	alad Adent	
HYPOLUXO FL 33462			82 Street	82 Street Address (P.O. Box Number is Not Acceptable)		
			83	111		
			94 04		100 7: 0.d.	
			84 City		FL 85 Zip Code	
11. Pursuant to the provisions of pertions 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
11. Pursuant to the provisions of politions 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 polity 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 fith an accept the obligations of, section 607.0505, Florida Statutes.						
SIGNATURE .	CINU -				0198	
	Stanting typed or printed name of registered agen		OTE: Registered Agent signatur	· · · · · · · · · · · · · · · · · · ·	ATE AND DIDECTORS IN	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICER		
NAME	MONCHER, FRED A	L DELETE	1.2 NAME	0, P,T,S.	Change Addition	
STREET ADDRESS	167 YACHT CLUB WAY #201		1.3 STREET ADDRESS	•		
CITY-ST-ZIP	HYPOLUXO FL 33462		1.4 CITY-ST-ZIP		,	
TITLE	*	DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP			
TITLE		DELÉTE	3.1 TITLE	-	Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition	
NAME		["] NETE IE	5.2 NAME		C Crionde [Nongon	
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
DITM OT TID			מול לפ עלוט ג פ			

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 active mental sinual 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 changes or on an attachment with an address.