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May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000080158 (4)

1. Corporation Name
MCOTA, INC.

Principal Place of Business
1705 N. 16TH STREET
TAMPA FL 33605

Mailing Address
1705 N. 16TH STREET
TAMPA FL 33605



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	3200 Henderson Blvd.	26	3200 Henderson Blvd.	09/25/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	Suite 100	27	Suite 100	NOT APPLICABLE	
City & State		City & State		Applied For	
23	Tampa, FL.	28	Tampa, FL.	Not Applicable	
24	Zip 33609	29	Zip 33609	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25	Country USA	30	Country USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
HESSEMER, ERIC 1705 N. 16TH STREET TAMPA FL 33605				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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	HESSEMER, LAWRENCE	1.2 NAME	
STREET ADDRESS	1705 N. 16TH STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33605	1.4 CITY - ST - ZIP	
TITLE	STD	2.1 TITLE	
NAME	HESSEMER, ERIC	2.2 NAME	
STREET ADDRESS	1705 N. 16TH STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33605	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	
NAME	HESSEMER, CHARLES	3.2 NAME	
STREET ADDRESS	1705 N. 16TH STREET	3.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33605	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
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:

Eric C. Hessemer 04/27/98 (813) 870-6800

CR2E034 (10/97)