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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CAB VENTURES, INC.

3. Date Incorporated or Qualified 11/14/1996		3a. Date of Last Report N/A	
4. FEI Number 65-0709653		Applied For	
		Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent	
BLUMBERG, JOEL B 2 HARVARD CIRCLE, SUITE 800 WEST PALM BEACH FL FL334-09	81 Name
	82 Street Address
	83
	84 City

10. Name and Address of New Registered Agent

_____ (P.O. Box Number is Not Acceptable)

FL **85** Zip Code _____

SIGNATURE _____

Signature, typed or printed name of registered agent and fee if applicable (NOTE: Registered Agent signature required when reinstalling) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D MILLER, CRAIG R	1.2 NAME	300002261053--6
STREET ADDRESS	2419 S DIXIE HWY	1.3 STREET ADDRESS	-08/07/97--01101--007
CITY - ST - ZIP	WEST PALM BEACH FL 33401	1.4 CITY - ST - ZIP	****165.00 ****165.00
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	8-6-97
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 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.

CR2E034 (4/97)

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**CAB Ventures Inc.
2419 South Dixie Hwy.
W.P.B. FL. 33401**

Dear Ms. Mortham,

I recently received my annual corporation profit report (second notice). My corporation, CAB Ventures Inc. was filed on November 14th 1996.

This is my first attempt at running my own business and as I'm sure you are well aware, the rules, requirements, and laws are overwhelming.

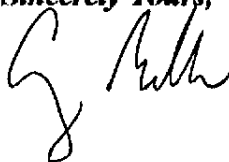
When I received my second notice the first thing that crossed my mind was that I don't remember ever receiving a first notice. Had I received a first notice I would have gladly avoided the \$385.00 late fee and sent my report in by the first deadline.

As I stated before, this is my first attempt at being a small business owner and I am doing my best to adhere to the numerous laws that govern the daily operation of a small business. I feel that if I did in fact receive my first annual report notice it was an oversight on my part to not pay my annual fee in a timely manner.

All I am asking for is a little understanding and cooperation in resolving this matter. I'm enclosing the original payment of \$165.00 in hopes that there will be some compassion in this matter. The \$385.00 late fee is a very large amount to someone like myself who is trying to get through the long off season period in order to try and turn a profit during season.

I realize that you get a lot of letters every day but I hope that you can see your way to understanding that this was an oversight on my part, one that will not occur anytime in the near future. As I stated earlier, it would be foolish for me to not pay this bill in a timely fashion, had I been aware of it sooner.

Sincerely Yours,



**Secretary of State
Division of Corporations
Annual Report
PO Box 6327
Tallahassee, FL. 32314-1500**