

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

FILED
Mar 12 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 # P97000007127 (8)
 1. Corporation Name
BLISS ENTERPRISES INTERNATIONAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **712 MARINERS WAY BOYNTON BEACH FL 33435**
 Mailing Address: **712 MARINERS WAY BOYNTON BEACH FL 33435**

3. Date Incorporated or Qualified: **01/24/1997**
 A. FEI Number: **59-3420968**
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business
 21. **7743 W. Country Club Blvd**
 Suite, Apt. #, etc.
 22. City & State: **BOCA RATON, FL**
 23. Zip: **33487** County: **USA**
 24. **33487** 25. **USA**
 26. Mailing Address: **7743 W. Country Club Blvd**
 Suite, Apt. #, etc.
 27. City & State: **BOCA RATON, FL**
 28. Zip: **33487** Country: **USA**
 29. **33487** 30. **USA**

9. Name and Address of Current Registered Agent
AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
 B1 Name: **ROBERT BLISS**
 B2 Street Address (P.O. Box Number is Not Acceptable): **7743 W. COUNTRY CLUB BLVD**
 B3
 B4 City: **BOCA RATON** FL B5 Zip Code: **33487**

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: Robert Bliss ROBERT BLISS DATE: 02/20/98

Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BLISS, THERESA E	1.2 NAME	Bliss, Theresa E
STREET ADDRESS	712 MARINERS WAY	1.3 STREET ADDRESS	7743 W. COUNTRY CLUB BLVD
CITY-ST-ZIP	BOYNTON BEACH FL 33435	1.4 CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	STD	2.1 TITLE	STD
NAME	BLISS, ROBERT L	2.2 NAME	BLISS, ROBERT L.
STREET ADDRESS	712 MARINERS WAY	2.3 STREET ADDRESS	7743 W. COUNTRY CLUB BLVD
CITY-ST-ZIP	BOYNTON BEACH FL 33435	2.4 CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	BLISS, THERESA E	1.2 NAME	Bliss, Theresa E
STREET ADDRESS	712 MARINERS WAY	1.3 STREET ADDRESS	7743 W. COUNTRY CLUB BLVD
CITY-ST-ZIP	BOYNTON BEACH FL 33435	1.4 CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE	STD	2.1 TITLE	STD
NAME	BLISS, ROBERT L	2.2 NAME	BLISS, ROBERT L.
STREET ADDRESS	712 MARINERS WAY	2.3 STREET ADDRESS	7743 W. COUNTRY CLUB BLVD
CITY-ST-ZIP	BOYNTON BEACH FL 33435	2.4 CITY-ST-ZIP	BOCA RATON, FL 33487
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		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: Robert Bliss ROBERT BLISS DATE: 02/20/98 561-988-2299

CR2E034 (10/97)