


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

FILED
May 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morthern Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000011530 (7)
1. Corporation Name
FLORIDA 7 INVESTMENT CORP.

Principal Place of Business 36908 CHANCEY ROAD ZEPHYRHILLS FL 33541	Mailing Address 36908 CHANCEY ROAD ZEPHYRHILLS FL 33541
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/05/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3433203	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent REITTINGER, WAYNE 36908 CHANCEY ROAD ZEPHYRHILLS FL 33541				10. Name and Address of New Registered Agent	
				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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DST	1.1 TITLE	D. EDWARD NEWCITY
NAME	REITTINGER, WAYNE	1.2 NAME	
STREET ADDRESS	36908 CHANCEY ROAD	1.3 STREET ADDRESS	411 WASHINGTON ST. SW
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	1.4 CITY-ST-ZIP	RUSSELLVILLE AL 35653
TITLE	D	2.1 TITLE	
NAME	MARK BAKER	2.2 NAME	
STREET ADDRESS	13607 N. FLORIDA AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33613	2.4 CITY-ST-ZIP	
TITLE	DP	3.1 TITLE	
NAME	DAVID D. DENNING	3.2 NAME	
STREET ADDRESS	13609 N. FLORIDA AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33613	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	
NAME	HARLAN STEARNS	4.2 NAME	
STREET ADDRESS	15513 RAMBLE BROOK LANE	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33624	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	RICHARD KESSENS	5.2 NAME	
STREET ADDRESS	13901 N. FLORIDA AVE # M197	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33613	5.4 CITY-ST-ZIP	
TITLE	DV	6.1 TITLE	
NAME	DALE WEST	6.2 NAME	
STREET ADDRESS	18118 HWY 41, LOT A	6.3 STREET ADDRESS	
CITY-ST-ZIP	LUTZ FL 33549	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 to this address.

SIGNATURE: _____ DATE: 4/14/98 352-583-4647

CR2E034 (10/97)