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

CORPORATION ANNUAL REPORT

1998



FLORIDA OFPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000012294 (9)

Principal Place of Business Mailing Address 1401 FORUM WAY, SUITE 302 1401 FORUM WAY, SUITE 302

FILED Apr 29 1998 8:00am Secretary of State

STARGATE ADVISORS, INC. WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/22/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0737062 Applied For 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Ζıρ Zip Country Personal Property Tax due June 30. 24 25 29 30 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name VALDES-FAULI CORPORATE SERVICES, INC. 777 S. FLAGLER DR. Street Address (P.O. Box Number is Not Acceptable) **SUITE 500 EAST** 83 WEST PALM BEACH FL 33401 City 84 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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and trie if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. 13. TITLE DELETE Change Addition ZENGA, V. JAMES ESO. NAME 1.2 NAME 1401 FORUM WAY, SUITE 302 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33401 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change DELETE 2.1 TITLE TITLE Robin A. Zenga NAME 22 NAME , suite 302 1401 Forom Way STREET ADDRESS 2.3 STREET ADDRESS West Palm Beach CITY - ST- ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Addition TITEF 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-SI-ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 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 correctation of the species or 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 correctation that is a supplemental 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 correctation that is a supplemental 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 correctation that is a supplemental 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 correctation that is a supplemental 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 correctation that is a supplemental 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 correctation that is a supplemental true and the correctation that the correctation is a supplemental true and the correctation of the correctat

SIGNATURE:

V. James Zenga

561-795-9200