

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

FILED
Apr 09 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 # 1. Corporation Name
P970000014614
RGP TECHNOLOGIES INC.

Principal Place of Business Mailing Address
P.O. BOX 46413
PASS-A-GRILLE BEACH FL 33741-6413

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business 243 HERMOSITA DR Suite, Apt. #, etc.	26	2a. Mailing Address P.O. BOX 46413 Suite, Apt. #, etc.
22	City & State ST. PETERSBURG BEACH FL.	27	City & State PASS-A-GRILLE BEACH FL.
24	Zip 33706	25	Country USA
29	Zip 33741-6413	30	Country USA

3. Date Incorporated or Qualified
2-12-97

4. FEI Number
59-3437027

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

9. Name and Address of Current Registered Agent
SEAN G. PRICE
243 HERMOSITA DRIVE
ST. PETERSBURG BEACH FL 33706

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		12 NAME	SECRETARY SEAN G. PRICE
STREET ADDRESS		13 STREET ADDRESS	243 HERMOSITA DR
CITY-ST-ZIP		14 CITY-ST-ZIP	ST. PETERSBURG BEACH FL 33706
TITLE	<input type="checkbox"/> DELETE	21 TITLE	C.E.O.
NAME		22 NAME	R. PRICE
STREET ADDRESS		23 STREET ADDRESS	243 HERMOSITA DR
CITY-ST-ZIP		24 CITY-ST-ZIP	ST. PETERSBURG BEACH FL 33706
TITLE	<input type="checkbox"/> DELETE	31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	600002484558
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	-04/10/98--01005--023
CITY-ST-ZIP		54 CITY-ST-ZIP	***150.00
TITLE	<input type="checkbox"/> DELETE	61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

600002484558
-04/10/98--01005--023
***150.00

PE
4.9

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: R.G. PRICE, C.E.O. 4-3-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)