


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

FILED  
Jan 21 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 # P97000016992 (4) 1. Corporation Name INFINITY BUSINESS SERVICES, INC.					
Principal Place of Business 15 PARADISE PLAZA SUITE 130 SARASOTA FL 34239			Mailing Address 15 PARADISE PLAZA SUITE 130 SARASOTA FL 34239		
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/19/1997	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3442518	
24 Country		29 Country		5. Certificate of Status Desired	
				X \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, X Yes	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, X Yes	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
MURRAY, PENNY J 18009 MISTY BLUE LANE TAMPA FL 33647			81 Name RANCE, LINDA J		
			82 Street Address (P.O. Box Number is Not Acceptable)		
			15 PARADISE PLAZA # 130		
			83		
			84 City SARASOTA FL		
			85 Zip Code 34239		
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 <i>Linda J Rance</i> LINDA J RANCE <i>Penny Murray</i> PENNY MURRAY 1-7-98					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE D			1.1 TITLE DIRECTOR		
1.2 NAME MURRAY, PENNY J			1.2 NAME RANCE, LINDA J		
1.3 STREET ADDRESS 18009 MISTY BLUE LANE			1.3 STREET ADDRESS 15 PARADISE PLAZA #130		
1.4 CITY-ST-ZIP TAMPA FL 33647			1.4 CITY-ST-ZIP SARASOTA FL 34239		
2.1 TITLE D			2.1 TITLE DIRECTOR		
2.2 NAME MURRAY, STEPHEN R			2.2 NAME RANCE, GREGORY L		
2.3 STREET ADDRESS 18009 MISTY BLUE LANE			2.3 STREET ADDRESS 15 PARADISE PLAZA #130		
2.4 CITY-ST-ZIP TAMPA FL 33647			2.4 CITY-ST-ZIP SARASOTA FL 34239		
3.1 TITLE			3.1 TITLE		
3.2 NAME			3.2 NAME		
3.3 STREET ADDRESS			3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP			3.4 CITY-ST-ZIP		
4.1 TITLE			4.1 TITLE		
4.2 NAME			4.2 NAME		
4.3 STREET ADDRESS			4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP			4.4 CITY-ST-ZIP		
5.1 TITLE			5.1 TITLE		
5.2 NAME			5.2 NAME		
5.3 STREET ADDRESS			5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP			5.4 CITY-ST-ZIP		
6.1 TITLE			6.1 TITLE		
6.2 NAME			6.2 NAME		
6.3 STREET ADDRESS			6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP			6.4 CITY-ST-ZIP		



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	
02/19/1997	
4. FEI Number	Applied For
59-3442518	Not Applicable

5. Certificate of Status Desired	X \$8.75 Additional Fee Required
6. Election Campaign Financing	\$5.00 May Be Added to Fees
Trust Fund Contribution	

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, X Yes	No
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10. Name and Address of New Registered Agent	
81 Name	RANCE, LINDA J
82 Street Address (P.O. Box Number is Not Acceptable)	15 PARADISE PLAZA # 130
83	
84 City	SARASOTA FL
85 Zip Code	34239

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 *Linda J Rance* LINDA J RANCE *Penny Murray* PENNY MURRAY 1-7-98

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	DIRECTOR
NAME	MURRAY, PENNY J	1.2 NAME	RANCE, LINDA J
STREET ADDRESS	18009 MISTY BLUE LANE	1.3 STREET ADDRESS	15 PARADISE PLAZA #130
CITY-ST-ZIP	TAMPA FL 33647	1.4 CITY-ST-ZIP	SARASOTA FL 34239
TITLE	D	2.1 TITLE	DIRECTOR
NAME	MURRAY, STEPHEN R	2.2 NAME	RANCE, GREGORY L
STREET ADDRESS	18009 MISTY BLUE LANE	2.3 STREET ADDRESS	15 PARADISE PLAZA #130
CITY-ST-ZIP	TAMPA FL 33647	2.4 CITY-ST-ZIP	SARASOTA FL 34239
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: *Linda J Rance* LINDA J RANCE 1-7-98 (941) 362-7120

CR2E034 (10/97)