FILE NOW: FILING FEE AFTER MAY 1ST IS

PROFIT CORPORATION **ANNUAL REPORT**

1998.



Secretary of State

DIVISION OF CORPORATIONS

FILED Apr 13 1998 8:00am Secretary of State

	NENT # P97000 IN SERVICE, INC.	0032432 (1)		(LOCKER) (IN 1808 IDAN BANI DANK BENER MINE MUNE HOUS ENDE HOLD INEI IER
Principal Place	of Business	Mailing Address		
32421 WOLFS T		32421 WOLFS TRAIL		
SORRENTO FL	32776	SORRENTO FL 32776		DO NOT WRITE IN THIS SPACE
•				3. Date Incorporated or Qualified
Principal Co.	es of Dunings	2a, Mailing Address		04/05/1997
2. Principal Pla	ce or business	26 Mailing Address		4. FEI Number Applied For S 9 - 3 4 4 3 3 3 4 Not Applied For
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.		Certificate of Status Desired S8.75 Additional
2	<u></u>	City & State		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
3 Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
4	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Registered Agent
	COLM, CLIVE R			
32421 WOLFS TRAIL			82 Street	Address (P.O. Box Number is Not Acceptable)
SUH	RENTO FL 32776		83	
			84 City	
				FL 85 Zip Code
NOMATI IDE			orida atutes.	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered ag	ent and title it applicable (NO	IE: Regled Agent signature	poration's board of directors. I hereby accept the appointment as registered
SIGNATURE E	Signature, typed or printed name of registered ag	ent and blie if applicable (NO	IE Regled Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. ITLE NAME	Signature, typed or printed name of registered ag	ent and title it applicable (NO	orida atutes. IE: Regled Agent signature TITLE VAME	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE E 12. ITLE IAME STREET ADDRESS	Signature, typed or printed name of registered ag	ent and title it applicable (NO	IE Regled Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
IGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP	Signature, typed or printed name of registered ag	ent and title it applicable (NO	IE: Regied Agent signature - TITLE VAME \$TREET ADDRESS	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento FL 32726
IGNATURE 2. TILE AME TREET ADDRESS ITY-ST-ZIP TILE	Signature, typed or printed name of registered ag	ent and left if epplicable (NO ID DIRECTORS DELETE	IE: Replied Agent signature . TITLE VAME TITREET ADDRESS :ITY-ST-ZIP JITLE JAME	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento FL 32726
IGNATURE 2. TILE AME TREET ADDRESS ITY - ST - ZIP TILE AME	Signature, typed or printed name of registered ag	ent and left if epplicable (NO ID DIRECTORS DELETE	IE: Regled Agent argnature TITLE VAME TIREET ADDRESS JITY-ST-ZIP JITLE JAME TREET ADDRESS	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento FL 32726
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP	Signature, typed or printed name of registered ag	ent and left if epplicable (NO ID DIRECTORS DELETE	IT. Regiod Agent agnature TITLE VAME TIREET ADDRESS SITY-ST-ZIP TITLE JAME TREET ADDRESS ZITY-ST-ZIP	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento 4423276 Change Addition
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS ITY-ST-ZIP ITLE	Signature, typed or printed name of registered ag	ent and left if equilicable (NO ID DIRECTORS DELETE DELETE	IE: Regled Agent argnature TITLE VAME TIREET ADDRESS JITY-ST-ZIP JITLE JAME TREET ADDRESS	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento FL 32776
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS ITY-ST-ZIP ITLE	Signature, typed or printed name of registered ag	ent and left if equilicable (NO ID DIRECTORS DELETE DELETE	II. Regied Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 32421 Wolfs Trail Sorrento 422276 Change Addition
Z. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ATY-ST-ZIP ITLE ITL	Signature, typed or printed name of registered ag	ent and left if equilicable (NO ID DIRECTORS DELETE DELETE	II. Regied Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS TREET ADDRESS	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Clive Malcolm 32421 Wolfs Trail Sorrento 4423276 Change Addition
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME IAM	Signature, typed or printed name of registered ag	ent and left if equilicable (NO ID DIRECTORS DELETE DELETE	II. Regiod Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 32421 Wolfs Trail Sorrento 422276 Change Addition
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS XTY-ST-ZIP ITLE IAME ITLE ITLE IAME ITLE ITLE IAME ITLE ITL	Signature, typed or printed name of registered ag	ent nucl lete it egiplicative (NO ID DIRECTORS DELETE DELETE DELETE	II. Regiod Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TITY-TITY-TITY-TITY-TITY-TITY-TITY-TITY	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Clive Malcolm 32421 Wolfs Trail Sorrento + L 32726 Change Addition
IGNATURE 2. TLE AME TREET ADDRESS ITY-ST-ZIP TLE AME TREET ADDRESS ITY-ST-ZIP TILE AME TREET ADDRESS	Signature, typed or printed name of registered ag	ent nucl lete it egiplicative (NO ID DIRECTORS DELETE DELETE DELETE	II: Flogled Agent agenture TITLE VAME TIREET ADDRESS SITY-ST-ZIP TITLE TAME TIREET ADDRESS SITY-ST-ZIP TILE TAME TREET ADDRESS SITY-ST-ZIP TILE TAME TREET ADDRESS THY-ST-ZIP TILE THE TAME TREET ADDRESS THY-ST-ZIP THE TAME TREET ADDRESS THY-ST-ZIP THE TAME THE TAM	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 32421 Wolfs Trail Sorrento + L 32774 Change Addition
SIGNATURE 2. ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag	ent nucl lete it egiplicative (NO ID DIRECTORS DELETE DELETE DELETE	II. Regiod Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TITY-TITY-TITY-TITY-TITY-TITY-TITY-TITY	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 2. ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITTLE IAME ITREET ADDRESS SITY-ST-ZIP ITTLE IAME ITREET ADDRESS CITY-ST-ZIP ITTLE IAME IAM	Signature, typed or printed name of registered ag	PORT AND DELETE DELETE DELETE DELETE	II. Regiod Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TITY-ST-ZIP TREET ADDRESS	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Clive Malcolm 32421 Wolfs Trail Sorrento + L 32776 Change Addition
Z. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS	Signature, typed or printed name of registered ag	PORT AND DELETE DELETE DELETE DELETE	II. Rogical Agent Address Agent Ag	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
EIGNATURE 2. ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS ITY-ST-ZIP ITLE IAME STREET ADDRESS ITY-ST-ZIP ITTLE IAME	Signature, typed or printed name of registered ag	DELETE DELETE DELETE DELETE	II. Regiod Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 2. ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME ITREET ADDRESS SITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP ITTLE IAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered ag	PORT AND DELETE DELETE DELETE DELETE	II. Regied Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	required when reinstaing) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE 12. ITLE IAME STREET ADDRESS CITY-ST-ZIP ITTLE IAME STREET ADDRESS CITY-ST-ZIP TITLE IAME ITTLE IAME ITTLE IAME	Signature, typed or printed name of registered ag	DELETE DELETE DELETE DELETE	II. Flogi ed Agent agnature . TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS	Change Addition Change Change
SIGNATURE	Signature, typed or printed name of registered ag	DELETE DELETE DELETE DELETE	II. Regied Agent agnature TITLE VAME TIREET ADDRESS TITY-ST-ZIP TITLE TAME TREET ADDRESS TITY-ST-ZIP TILE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TITY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TAME TREET ADDRESS TY-ST-ZIP TLE TREET ADDRESS TY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Clive Malcolm 32421 Wolfs Trail Sorrento

officer or director of the corporation or the receiver or frustee empowered to exechis 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.