


4 20 98 B. 5148 -XC
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000034010 (3)
1. Corporation Name
SHARP IDEAS, INC.



Principal Place of Business 4804 WINDMILL PALM TERRACE N.E. ST. PETERSBURG FL 33703 9500 Koger Blvd, Ste 114 St. Petersburg FL 33702	Mailing Address 4804 WINDMILL PALM TERRACE N.E. ST. PETERSBURG FL 33703 9500 Koger Blvd 114 St. Petersburg FL 33702
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9500 Koger Blvd Suite, Apt. #, etc. 22 114 City & State 23 St. Petersburg FL Zip 24 33702 Country 25 USA	2a. Mailing Address 26 9500 Koger Blvd Suite, Apt. #, etc. 27 114 City & State 28 St. Petersburg FL Zip 29 33702 Country 30 USA	3. Date Incorporated or Qualified 04/15/1997 4. FEI Number 59-043-0500 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent SOLTOFF, PAUL 4804 WINDMILL PALM TERRACE N.E. ST. PETERSBURG FL 33703	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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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	D SOLTOFF, PAUL 4804 WINDMILL PALM TERRACE N.E. ST. PETERSBURG FL 33703	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY - ST - ZIP		1.4 CITY - ST - ZIP	
TITLE	D SOLTOFF, ROBIN 4804 WINDMILL PALM TERRACE N.E. ST. PETERSBURG FL 33703	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	D BRECHNER, IRVIN 10 BROCKTON CT. METUCHEN NJ 08840	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	D BRECHNER, NADINE 10 BROCKTON CT. METUCHEN NJ 08840	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: Robin Soltoff (Robin Soltoff) 4-12-98 813 576 6630

CR2E034 (10/97)