

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

FILED
Apr 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 # P97000038681
1. Corporation Name

Hunter & Hobbs, Inc.

Principal Place of Business	Mailing Address
8415 W. McNab Road Tamarac, FL 33321	8415 W. McNab Road Tamarac, FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
04/29/97

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 8415 W. McNab Road	26 8415 W. McNab Road	65-0749397	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22	27	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be Added to Fees
23 Tamarac FL	28 Tamarac FL	Trust Fund Contribution	<input type="checkbox"/>
Zip	Zip	Country	
24 33321	29 33321	30 U.S.A.	
Country	Country		
25 U.S.A.	31 U.S.A.		

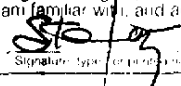
9. Name and Address of Current Registered Agent

Thomas DeSernia
21538 Sweetwater Lane South
Boca Raton, FL 33428

10. Name and Address of New Registered Agent

81 Name	Steven Katz
82 Street Address (P.O. Box Number is Not Acceptable)	8415 W. McNab Road
83	
84 City	Tamarac
85 Zip Code	FL 33321

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:  Steven Katz

(NOTE: Registered Agent signature required when reinstating)

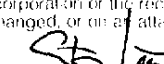
DATE

4-16-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	President, CEO, Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	Steven Katz
STREET ADDRESS		1.3 STREET ADDRESS	8415 W. McNab Road
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Tamarac, FL 33321
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	Vice-President, Tres. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Sheryl Moriarty
STREET ADDRESS		2.3 STREET ADDRESS	8415 W. McNab Road
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Tamarac, FL 33321
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Thomas DeSernia
STREET ADDRESS		3.3 STREET ADDRESS	21526 Sweetwater Ln S.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Boca Raton, FL 33428 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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:



STEVEN KATZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-98

Date

954 7244780

Daytime Phone #

CR2E034 (10/97)