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

SIGNATURE:

Mar 23 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT. Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 'P97000039645 (1) ARIES INVESTMENTS, INC. Principal Place of Business Mailing Address 730 W COLONIAL DR 730 W COLONIAL DR ORLANDO FL 32804 ORLANDO FL 32804 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/01/1997 2. Principal Place of Business 2e, Mailing Address Applied For 59.3441893 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zıp Country Country This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. Yes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 HEW. NICOLE 730 W COLONIAL DR Street Address (P.O. Box Number is Not Acceptable) 82 ORLANDO FL 32804 83 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, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE KANJI, AZINA NAME 1.2 NIME CR2E034 730 W COLONIAL DR 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32804 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TI LE JWANI, JAFFER NAME 22 NAME 935 HWY 27 NO 2.3 S REET ADDRESS STREET ADDRESS LAKE WALES FL 33853 CITY-ST-ZIP 2.4 TY-ST-ZIP DELETE TITLE 3.1 TILE Change Addition AKBERALI, ALNOOR NAME 3.2 N ME 530 S LAKESHORE WAY 3.3 S REET ADDRESS STREET ADDRESS LAKE ALFRED FL 33850 CITY-ST-ZIP TY - ST - ZIP DELETE Change Addition TITLE 4.1 ME NAME 4.2 STREET ADDRESS REET ADDRESS CITY - ST - ZVP Y-ST-ZIP DELETE Change Addition TITLE 5.1 5.2 NAME STREET ADDRESS REET ADDRESS CITY-ST-ZIP Y-ST-ZIP DELETE Change Addition TITLE NAME STREET ADDRESS FT ADDRESS CITY-ST-ZIP - \$1 - ZIP 14. Thereby certify that the information supplied with this filing does not qualify for the indicated on this annual report or supplemental annual report is true and accurate officer or director of the corporation or the receiver or trustee empowered to execut Block 12 or Block 13 if changed or on an attachment with an address. inption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am an ils report as required by Chapter 607, Florida Statutes; and that my name appears in

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