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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000040144 (2)

FRANK KASPER, INC.

Principal Place of Business Mailing Address 3900 SW 52ND AVE. APT. 804 3900 SW 52ND AVE. APT. 804 PEMBROKE PARK FL 33023 PEMBROKE PARK FL 33023 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/06/1997 4. FEI Number Applied For 2. Principal Place of Business Mailing Address 65-0750916 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip 8. This corporation owes or has paid the current year Intangible Zip Country Personal Property Tax due June 30. Yes 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KASPER, FRANK 3900 SW 52ND AVE, APT. 804 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PARK FL 33023 83 Zip Code City 85 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 oblications of. Section 607.0505. Florida Statutes.

agent i	an raminal with and accept the conganons of ce		a ciaidico.			
SIGNATURE	Signature, typed or printed name of registered agent and title if app	blicable. (NOTE F	Registered Agent signature rec	guired when reinstating) DATE		
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFICERS AND DIREC	DNS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1,1 TITLE	Ch	ange	Addition
NAME	KASPER, FRANK		1.2 NAME			
STREET ADDRESS	3900 SW 52ND AVE, APT. 804		1.3 STREET ADDRESS			
CITY-ST-ZIP	PEMBROKE PARK FL 33023		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE	□ Ch	ange	Addition
NAME	{		2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY - ST - ZIP			2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE	L Ch	ange	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE	⊥ Ch	ange	Addition
NAME			4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE	Ch	ange	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE	L Ch	ange	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

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:

Frank KARLURFRANK VASPEN

1-14-98

954-966-8023

FILED

Jan 23 1998 8:00am

Secretary of State