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FILED
May 15, 1999 8:00 am
Secretary of State

05-15-1999 90025 037 ***150.00

PROFIT CORPORATION* ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
 Kathryn Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 997000040586
 1. Corporation Name
107th St. Industrial Park, Inc.

Principal Place of Business
503 107th St
 Marathon FL
 33050

Mailing Address
PO box 773631
 Steamboat Springs
 Co. 80477

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
May 6, 1997

2. Principal Place of Business
 21 503 107th St.
 Suite, Apt. #, etc.

2a. Mailing Address
 26 PO box 773631
 Suite, Apt. #, etc.

22 27

23 Marathon FL 28 Steamboat Springs, Co.
 City & State

24 33050 25 USA 29 80477 30 USA
 Zip Country

4. FEI Number
52-1199270 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing
 Trust Fund Contribution **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

Christine E. Puto
 63 53rd St Ocean
 Marathon FL 33050

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE DELETE
 NAME president
 STREET ADDRESS Mario Avella
 CITY-ST-ZIP 1900 Fishcreek falls Rd
Steamboat Springs Co 80477

TITLE DELETE
 NAME Sec. Treas.
 STREET ADDRESS Sue Di Cesare
 CITY-ST-ZIP 1900 Fishcreek falls Rd.
Steamboat Springs Co 80477

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 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 my address, with all other like empowered.

SIGNATURE: Mario Avella Mario Avella 5/13/99 970 870 1860
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)