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 #

P97000051025 (9)

AMEBA, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1998 8:00am Secretary of State



Filiable index	, c. p _ccc				
8835 N.W. 4 CORAL SPR	14TH CT. Rings FL 33065	8835 N.W. 44TH CT. CORAL SPRINGS FL 3306	5	DO NOT WOLF IN THE	2 ADMOC
				DO NOT WRITE IN THIS	SAMAUE
				Date Incorporated or Qualified06/09/1997	
2. Principal Pl	ace of Business	2a. Mailing Address	#	4. FEI Number	Applied For
21 2\	5. E. 10" STREET	26 215.E. (O	"STEEFET	65-0760649	Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	_	6. Election Campaign Financing	\$5.00 May Be
23 DE E	rfield Beaut, Fi	28 DEERFLEU	D BEACH, F	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24 334			Bew	Personal Property Tax due June 30.	Yes No
	g, Name and Address of Current F	legistered Agent		10. Name and Address of New Registere	d Agent
В	ANTON, MICHAEL		81 Name	MICHAEL BA	WOTU
	835 N.W. 44TH CT.		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
C	ORAL SPRINGS FL 33065		21	S.E. LOTT STE	<u>==</u>
			83		
			84 City	ERFIELD BEAUT F	
11. Pursuant t	to the provisions of Sections 607.0502 a egistered agent, or both, in the <u>State of</u>	ind 607.1508, Florida Statutes Elorida. Such change was aut	the above-named o	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	of changing its registered
agent. I a	m familiar with, and account to only late				20-98
SIGNATURE	Signature, typed or printed name of registered agent a		CHAEL BA	outred when reinstating) DATE	20-10
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE (PRESIDENT	L Change Addition
NAME	BANTON, MICHAEL		1.2 NAME	MICHAEL BAN	CAST
I	8835 N.W. 44TH CT.		1.3 STREET ADDRESS	21 S.E. 10th	STREET
STREET ADDRESS	CORAL SPRINGS FL 33065			DEEL FIELD BEACH	OFL BEALL
CITY-ST-ZIP TITLE	CONAL SPHINGS PL 33003	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	7-22-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Change Addition
			2.2 NAME		<u></u> · • ·
NAME			2.3 STREET ADDRESS	•	
STREET ADDRESS					
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TITLE			3.2 NAME		
NAME					
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
TITLE		C) beech			
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
TITLE					en cuenda En voquon
NAME			5.2 NAME 5.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		DELETE	6.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
TITLE		E.J DELLIE			change reduces
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	alf that the information appears of the	this filling does not qualify for	6.4 CiTY-ST-ZIP	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated	on this annual report or supplemental a	innual report is true and accur	ate and that my sign	ature shall have the same legal effect as it made	under oath; that I am an
officer or	director of the corporation or the receiver Block 13 if changed, or on an atlach	er or trustee empower ed to ex	ecute this report as r	equired by Chapter 607, Florida Statutes; and tha	at my name appears in
DIOCK 12	or place to it cripinged, or or an italia	ment from an address.			