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 #

P97000065760 (5)

VALUBASE, INC.

FILED May 26 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2679 CASCADE QOURT 2673 CASCADE COURT CLEARWATER FL 34621 CLEARWATER FL 34621 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/30/1997 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zip Zip Country Country This corporation owes or has paid the current year Intangible Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **AMERILAWYER CHARTERED** 343 ALMERIA AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 64 City 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, typical or proceed non-endingerious diagent and talle diapplicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE PTD Change Addition TITLE 1.1 TITLE STANGE, WERNER NAME 1.2 NAME 2673 CASCADE COURT STREET ADDRESS 1.3 STREET ADDRESS CLEARWATER FL 34621 1.4 CITY - ST - 7(P CITY-ST-ZIP DELETE 2.1 TITLE Change Addition STUTLER, BARRY 2.2 NAME NAME 2873 CASCADE COURT STREET ADDRESS 2.3 STREET ADDRESS CLEARWATER FL 34621 CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Change Addition 3 1 1ITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.110116 NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Chang DELETE 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change TITLE 61 TITLE 000002536830 62 NAME NAME -05/27/98--01074--041 STREET ADDRESS 63 STREET ADDRESS ***150.00 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 13 if changed, or on an attachment with an address.

CICNIATURE.