

NOTE NOW: FILING FEE AFTER MAY 1ST IS \$50.00

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mason Secretary of the DIVISION OF CORPORATIONS
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DOCUMENT # P97000068524 (2)
1. Corporation Name
Q - DOCK INC.

Principal Place of Business THE LANDING MARINA 23 OSCAR HILL ROAD TARPON SPRINGS FL 34689	Mailing Address THE LANDING MARINA 23 OSCAR HILL ROAD TARPON SPRINGS FL 34689
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2. Principal Place of Business 21 2963 GULF-TO-BAY BLVD Suite, Apt. #, etc. 22 SUITE 270 City & State 23 CLEARWATER FL Zip 24 34619	2a. Mailing Address 26 2963 GULF-TO-BAY BLVD Suite, Apt. #, etc. 27 SUITE 270 City & State 28 CLEARWATER FL Zip 29 34619 Country 25 USA 30 USA
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8. Name and Address of Current Registered Agent

**CAROSELLA, FRANK
19810 WYNDHAM LAKES DR
ODESSA FL 33556**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the 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)

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT	<input type="checkbox"/> DELETE
NAME TERRY CALDWELL	
STREET ADDRESS 3914 STREAMSIDE LANE	
CITY-ST-ZIP NEW PORT RICHEY FL 34655	
TITLE EXECUTIVE VP, TREAS, SECRETARY	<input type="checkbox"/> DELETE
NAME FRANK CAROSELLA	
STREET ADDRESS 19810 WYNDHAM LAKES DR.	
CITY-ST-ZIP ODESSA FL 33556	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/06/1997	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 59-3462094	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

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	

I, the above-named corporation submits this statement for the purpose of changing its registered agent by the corporation's board of directors. I hereby accept the appointment as registered agent.

SIGNATURE _____ DATE _____

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 an address.

SIGNATURE: **FRANK CAROSELLA**

4/9/98 813 937-4696

CR2E034 (10/97)