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May 06, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # P97000072488

1. Corporation Name
SOS VENTURES, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 7411 FULLERTAN ST JACKSONVILLE FL 32256 US
Mailing Address: 7411 FULLERTON ST JAX FL 32256 US

3. Date Incorporated or Qualified: 08/18/1997
4. FEI Number: 59-3464673
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: Yes

2. Principal Place of Business: 21 Same as above
2a. Mailing Address: 26 Same
22. Suite, Apt. #, etc.
23. City & State
24. Zip: 25 Country

9. Name and Address of Current Registered Agent
SELLERS, WILLIAM E JR.
401 HICKORY ACRES LN
SWITZERLAND FL 32259

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: _____ DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Table with 12 rows for Officers and Directors. Includes columns for Title, Name, Street Address, and City-ST-ZIP. Row 1: P SELLERS, VICKI, 7411 FULLERTON ST, JAX FL 32256.

Table with 13 rows for Additions/Changes to Officers and Directors. Includes columns for Title, Name, Street Address, and 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, with all other like empowered.

SIGNATURE: Victoria Sellers DATE: 4/30/99 Daytime Phone #: 904-519-7767

CR2E034 (11/98)