

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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Apr 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000077062 (2)
1. Corporation Name
GENESIS PRODUCTS, INC.



Principal Place of Business: 717 FALLS CREEK DRIVE, WEST MELBOURNE FL 32904
Mailing Address: 717 FALLS CREEK DRIVE, WEST MELBOURNE FL 32904

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 1700 West New Haven Avenue, Melbourne, FL 32904
2a. Mailing Address: Genesis Products, Inc., P.O. Box 851, Melbourne, FL 32902-0851
22. Suite, Apt. #, etc.: 1700 West New Haven Avenue, Melbourne, FL 32904
23. City & State: Melbourne, FL
24. Zip: 32904
25. Country: USA

3. Date Incorporated or Qualified: 09/05/1997
4. FEI Number: 59-3470671
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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: FRANK J. PALLADINO, 717 FALLS CREEK DRIVE, WEST MELBOURNE FL 32904
EDWIN B. McDONALD, Genesis Products, Inc., P.O. Box 851, Melbourne, FL 32902-0851

10. Name and Address of New Registered Agent: EDWIN B. McDONALD, 717 FALLS CREEK DRIVE, WEST MELBOURNE, FL 32904

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: Edwin B. McDonald, PRESIDENT, DATE: 4/22/98

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	PALLADINO, FRANK J.	
STREET ADDRESS	717 FALLS CREEK DRIVE	
CITY-ST-ZIP	WEST MELBOURNE FL 32904	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MCDONALD, EDWIN B	
STREET ADDRESS	717 FALLS CREEK DRIVE	
CITY-ST-ZIP	WEST MELBOURNE FL 32904	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	PANANO, MILES	
STREET ADDRESS	702 E NEW HAVEN AVE	
CITY-ST-ZIP	MELBOURNE FL 32901	
TITLE		<input type="checkbox"/> DELETE
NAME	PLEASE NOTE: CHANGES EFFECTIVE 4/22/98	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	EDWIN B. McDONALD	
1.3 STREET ADDRESS	717 FALLS CREEK DRIVE	
1.4 CITY-ST-ZIP	WEST MELBOURNE, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	VICE PRESIDENT	
2.2 NAME	MARCUS MICHELS	
2.3 STREET ADDRESS	717 FALLS CREEK DRIVE	
2.4 CITY-ST-ZIP	WEST MELBOURNE, FL 32904	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	FRANK J. PALLADINO	
3.3 STREET ADDRESS	717 FALLS CREEK DRIVE	
3.4 CITY-ST-ZIP	WEST MELBOURNE, FL 32904	
4.1 TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	FRANK J. PALLADINO	
4.3 STREET ADDRESS	717 FALLS CREEK DRIVE	
4.4 CITY-ST-ZIP	WEST MELBOURNE, FL 32904	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 an address.

SIGNATURE: Edwin B. McDonald, DATE: 4/22/98

REC-034 (10/97)