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 # P97000078495 (3)

STRINGER INTERNATIONAL INC.

Principal Place of Business

SIGNATURE:

Mailing Address

3300 RICE STREET SUITE 900 COCONUT GROVE FL 33133

3300 RICE STREET SUITE 900 COCONUT GROVE FL 33133

FILED Mar 26 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

305-378-7/26

									3. Date Incorporated or Qualified								
					<u> </u>						09/10/1997						
	Principal Pla	cipal Place of Business				2a. Mailing Address				4	4. FEI Number	C- 25	1007		<u> </u>	+	led For
21	0.32				26						<u>&</u>	5-05	17709	<u>"</u>			Applicable
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.				6	5. Certificate of	Status Des	ired [_		5 Ad BRequ	ditional uired	
City & State					City & State						B. Election Cam	paign Fina	ncing		\$ 5.	00 м	ay Be
23					28				Trust Fund Contribution					Add	Added to Fees		
_	Zip	Country					Country			[8	3. This corporati		•	_	- '	_	- 1
24			25		29		30				Personal Prop			=	Yes	<u> </u>	No
g. Name and Address of Current Registered Agent								91	Name	10	0. Name and A	ddress of	New Hegis	tered A	gent		
CORPORATE CREATIONS ENTERPRISES, INC.									Maine								
4521 PGA BOULEVARD #211								82 Street Add			(P.O. Box Numb	er is Not A	cceptable)				
PALM BEACH GARDENS FL 33418							<u> </u>	_									
							ļ°	33									1
							8	84 City						FI	85	Zip Co	de
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															egistered		
•••	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 Statules,																
SIGNATURE Stgnature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE																	
12.			OFFI	CERS AND E	DIRECTORS		13.				ADDITIONS/CH	HANGES TO	OFFICER	S AND	DIREC	TORS	IN 12
TITL	E	D				DELETE	1.1 TITLE	E							Char	ge	Addition
NAME BRIGHAM, TIMOTHY				12 NA		1E	Ì								i		
STREET ADDRESS 3300 RICE S		ce street s	STREET SUITE 900			1.3 STRE	EET A	ADDRESS				•					
CITY	r-ST-ZIP	COCON	UT GROVE F	L 33133			1.4 CITY	'- ST	-ZiP								1
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i	ET ADORESS						6.3 STRE		ADDRESS								1
	-ST-ZIP						6.4 CITY										1
14.	I hereby ce	rtify that the	information su	pplied with t	this filing doe	s not qualify fo	or the exem	ptie	on stated	d in Secti	ion 119.07(3)(i),	Florida Sta	tutes. I furt	her cert	ify that	the inf	ormation
	indicated o officer or di	in this annua irector of the	al report or sup	plemental at r the receive	nnual report i r or truslee ø	is true and acc impowered to i	curate and t	that	t my sign:	nature sha	all have the sam by Chapter 607	ne legal ette	ect as if me	ide und	er oath	that I	am an