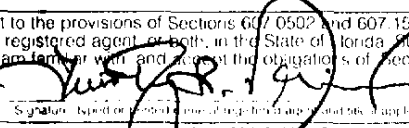
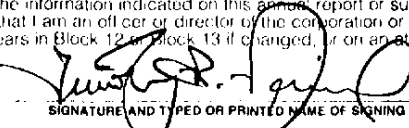


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FILED
May 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT		1996 1998		FLORIDA DEPARTMENT OF STATE Sandra H. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000083192 1. Corporation Name AGILITY INDUSTRIES, INC.					
Principal Place of Business Mailing Address					
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified September 24, 1997 3a. Date of Last Report	
21 534 Davis Lake Drive		26 534 Davis Lake Drive		4. FET Number <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable	
22 Suite, Apt. #, etc		27 Suite, Apt. #, etc		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 City & State Oxford, MI		28 City & State Oxford, MI		6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Zip 48371 25 Country		29 Zip 48371 30 Country USA		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
			81 Name Timothy B. Perenich, Esquire		
			82 Street Address (P.O. Box Number is Not Acceptable) 180 Alternate 19 North		
			83		
			84 City Palm Harbor, FL 85 Zip Code 34683		
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  Timothy B. Perenich, Registered Agent April 30, 1998					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1. TITLE		1.1 TITLE		PSTD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
2. NAME		2.1 NAME		Stephen M. Perenich	
3. STREET ADDRESS		3.1 STREET ADDRESS		534 Davis Lake Drive	
4. CITY - ST - ZIP		4.1 CITY - ST - ZIP		Oxford, MI 48371	
5. TITLE		5.1 TITLE		VPD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
6. NAME		6.1 NAME		Timothy B. Perenich	
7. STREET ADDRESS		7.1 STREET ADDRESS		180 Alternate 19 North	
8. CITY - ST - ZIP		8.1 CITY - ST - ZIP		Palm Harbor, FL 34683	
9. TITLE		9.1 TITLE		Terence A. Perenich <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
10. NAME		10.1 NAME		534 Davis Lake Drive	
11. STREET ADDRESS		11.1 STREET ADDRESS		Oxford, MI 48371	
12. CITY - ST - ZIP		12.1 CITY - ST - ZIP			
13. TITLE		13.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
14. NAME		14.1 NAME			
15. STREET ADDRESS		15.1 STREET ADDRESS			
16. CITY - ST - ZIP		16.1 CITY - ST - ZIP			
17. TITLE		17.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
18. NAME		18.1 NAME			
19. STREET ADDRESS		19.1 STREET ADDRESS			
20. CITY - ST - ZIP		20.1 CITY - ST - ZIP			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 and Block 13 if changed, or on an attachment with an address.					
SIGNATURE:  Timothy B. Perenich, Vice President					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR April 30, 1998					
Daytime Phone: # (813) 934-9655					

CR2E034 (12/95)