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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000084521 (8)

ENDLESS PALMS INC.

FILED Jun 04 1998 8:00am Secretary of State

Mailing Address Principal Place of Business 3744 2ND AVE NORTH 3744 2ND AVE NORTH ST PETERSBURG FL 33713 ST PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/22/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 476091 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DUNNE, JOHN P Street Address (P.O. Box Number is Not. 3 7 4 4 201 10833 70TH AVE N 82 SEMINOLE FL 33772 83 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. Hereby accept the appointment as registered agent. Languagnillar with, and accept the obligators of Section 607.0505, Florida Statutes.

SIGNATURE JAHES F. Oldham SIGNATURE 72E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DELETE Change Addition TITLE 11 THLE OLDHAM, JAMES R 1.2 NAME NAME 3744 2ND AVE NORTH STREET ADDRESS 1.3 STREET ADDRESS **ST PETERSBURG FL 33713** 1.4 CITY - ST - ZIP CITY-ST-ZIF DELETE Change Addition 2.1 TO LE TITLE **DE ARMON, DONALD K** 2.2 NAME NAME **3744 2ND AVE NORTH** 23 STREET ADDRESS STREET ADDRESS **ST PETERSBURG FL 33713** 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELFTE 3.1 TITLE Change Addition TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 City - ST- ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. Thereby 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 13 if changed, or on an attachment with an address.