

FILED
Jun 26 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 # P97 000091978

1. Corporation Name
Annaprin Corporation
568 Ninth St #111
Naples FL 34102

Principal Place of Business
Mailing Address

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 77 Swinnerton St
27 City & State
28 Staten Island NY
29 10301
30 US

3. Date Incorporated or Qualified
10/27/97

4. FET Number
Applied for

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
John Grassi
568 Ninth St S #111
Naples FL 34102

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0702 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office and registered agent to the following: 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 607.0706, Florida Statutes.

SIGNATURE
OFFICERS AND DIRECTORS
12. TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-STATE-ZIP
15 TITLE
16 NAME
17 STREET ADDRESS
18 CITY-STATE-ZIP
19 TITLE
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61 STREET ADDRESS
62 CITY-STATE-ZIP
63 TITLE
64 NAME
65 STREET ADDRESS
66 CITY-STATE-ZIP
67 TITLE
68 NAME
69 STREET ADDRESS
70 CITY-STATE-ZIP

14. I hereby certify that this form is completed in good faith and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information contained in this 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; and that I am duly empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 22 of this report as required by said statute.

SIGNATURE

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Karey Hensley CPA

5117 Castello Drive, Suite 1
Naples, Florida 34103
(941) 434-8683
FAX 434-7793

June 23, 1998

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

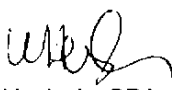
RE: Annprin Corporation

Dear Sirs:

Enclosed please find 1998 Annual Report along with check for \$150.00. We are asking your consideration in waiving penalty and interest for 1998 report as it was never received. Please reinstate corporation. * Send Certificate of Good Standing.

Thank you.

Sincerely,


Karey Hensley, CPA, PA