

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 01 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 # P97000092677 (8)
 1. Corporation Name

EMERSON BENNETT & ASSOCIATES, INC.



Principal Place of Business: 11365 LITTLE BEAR WAY BOCA RATON FL 33428
 Mailing Address: 11365 LITTLE BEAR WAY BOCA RATON FL 33428

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/28/1997
 4. FEI Number: 65-0806805 Applied For: Not Applicable
 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

2. Principal Place of Business: 21 6261 NW 6th Way, Suite 207, Ft Lauderdale, FL 33309, USA
 2a. Mailing Address: 26 6261 NW 6th Way, Suite 207, Ft Lauderdale, FL 33309, USA

9. Name and Address of Current Registered Agent

SOUTH FLORIDA REGISTERED AGENTS, INC.
 200 E. LAS OLAS BLVD., STE. 1900
 FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City: FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	P/D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	Brentley C. Martin
STREET ADDRESS		1.3 STREET ADDRESS	6261 NW 6th Way, #207
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Ft Lauderdale, FL 33309
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	V/D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Douglass K. Aguililla
STREET ADDRESS		2.3 STREET ADDRESS	6261 NW 6th Way, #207
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Ft Lauderdale, FL 33309
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	V/S/D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	Eric M. Vallejo
STREET ADDRESS		3.3 STREET ADDRESS	6261 NW 6th Way, #207
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Ft Lauderdale, FL 33309
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	Joseph J. Azzata
STREET ADDRESS		4.3 STREET ADDRESS	6261 NW 6th Way, #207
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Ft Lauderdale, FL 33309
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: [Handwritten Signature]

CR2E034 (5/98)