


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 16 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 # P97000096125 (4)
 1. Corporation Name
STEP BY STEP, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: **50 N LAURA STREET #3300 JACKSONVILLE FL 32202**
 Mailing Address: **50 N LAURA STREET #3300 JACKSONVILLE FL 32202**
c/o McGuire Woods Battle & Boothe LLP

3. Date Incorporated or Qualified: **11/10/1997**

4. FEI Number: **59-3476858** 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 Suite, Apt #, etc.: 22 City & State: 23 Zip: 24 Country: 25

2a. Mailing Address: 26 Suite, Apt #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent
RAX CO
~~XXXXXXXXXXXXXXXXXXXX~~
50 N LAURA ST #3300 JACKSONVILLE FL 32202
c/o McGuire Woods Battle & Boothe, LLP

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 607.0502 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 _____ DATE _____
 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D/P/T	<input type="checkbox"/> DELETE
NAME	GONZALEZ, EDGAR	
STREET ADDRESS	6602 MACKENZIE PLACE	
CITY-ST-ZIP	LJAMSVILLE MD 21754	
TITLE	D/S	<input type="checkbox"/> DELETE
NAME	GONZALEZ, JANET	
STREET ADDRESS	6602 MACKENZIE PLACE	
CITY-ST-ZIP	LJAMSVILLE MD 21754	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P/T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Edgar Gonzalez	
1.3 STREET ADDRESS	7150 Marsh Hawk Court	
1.4 CITY-ST-ZIP	Ponte Vedra, FL 32082	
2.1 TITLE	D/VP/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Gonzalez, Janet	
2.3 STREET ADDRESS	7150 Marsh Hawk Court	
2.4 CITY-ST-ZIP	Ponte Vedra, FL 32082	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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: **Edgar Gonzalez, President** 1/5/98 (904) 798-3200

CR2E034 (10/97)