

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

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 997000098836			
1. Corporation Name Worth Builders of Palm Beach, Inc.			
Principal Place of Business 1137 Clare Avenue West Palm Beach, Florida 33401		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21 N/A	26 N/A		
22 Suite, Apt. #, etc. N/A	27 Suite, Apt. #, etc. N/A		
23 City & State N/A	28 City & State N/A		
24 Zip N/A	25 Country	29 Zip N/A	30 Country N/A
9. Name and Address of Current Registered Agent			
Thomas M. Eastwood 1137 Clare Avenue West Palm Beach, FL 33401			
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 obligation of, Section 607.0505, Florida Statutes.			
SIGNATURE <i>Thomas M. Eastwood</i>		10. Name and Address of New Registered Agent	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P/S/T/D	11 TITLE	[] Change [] Addition	
NAME Thomas M. Eastwood	12 NAME		
STREET ADDRESS 1137 Clare Avenue	13 STREET ADDRESS		
CITY-ST-ZIP West Palm Beach, FL 33401	14 CITY-ST-ZIP		
TITLE [] DELETE	21 TITLE	[] Change [] Addition	
NAME	22 NAME		
STREET ADDRESS	23 STREET ADDRESS		
CITY-ST-ZIP	24 CITY-ST-ZIP	[] Change [] Addition	
TITLE [] DELETE	31 TITLE		
NAME	32 NAME		
STREET ADDRESS	33 STREET ADDRESS		
CITY-ST-ZIP	34 CITY-ST-ZIP	[] Change [] Addition	
TITLE [] DELETE	41 TITLE		
NAME	42 NAME		
STREET ADDRESS	43 STREET ADDRESS		
CITY-ST-ZIP	44 CITY-ST-ZIP	[] Change [] Addition	
TITLE [] DELETE	51 TITLE		
NAME	52 NAME		
STREET ADDRESS	53 STREET ADDRESS		
CITY-ST-ZIP	54 CITY-ST-ZIP	[] Change [] Addition	
TITLE [] DELETE	61 TITLE		
NAME	62 NAME		
STREET ADDRESS	63 STREET ADDRESS		
CITY-ST-ZIP	64 CITY-ST-ZIP		

FILED

99 FEB -1 AM 10:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
November 19, 1997
4. FEI Number
65-0799831
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 the current year Intangible Personal Property Tax. [] Yes [X] No

81 Name N/A

82 Street Address (P.O. Box Number is Not Acceptable)
400002763924--0

83 City

84 City

85 Zip Code
02/03/99--01079--010
******150.00 ****150.00**
FL

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered.

SIGNATURE:

Thomas M. Eastwood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/99 (561)832-0500

CR2E034 (1/198)