

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

FILED
Jul 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000099916 (3)**
1. Corporation Name
CAPITAL SECURITIES DEVELOPMENT GROUP, INC.



Principal Place of Business 707 ROBIN AVE PALM HARBOR FL 34683	Mailing Address 707 ROBIN AVE PALM HARBOR FL 34683
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 10166 Seminole Island DR.		2a. Mailing Address 10166 Seminole Island DR.		3. Date Incorporated or Qualified 11/20/1997	
21. Suite, Apt. #, etc. LARBO,		26. Suite, Apt. #, etc. LARBO, FL.		4. FEI Number <input checked="" type="checkbox"/> Applied For Not Applicable	
22. City & State FLORIDA		27. City & State LARBO, FL.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23. Zip 33773		28. Zip 33773		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24. Country USA		29. Country USA		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**REITZ, DAVID W
707 ROBIN AVE
PALM HARBOR FL 34683**

10. Name and Address of New Registered Agent

81. Name DAVID REITZ
82. Street Address (P.O. Box Number is Not Acceptable) 10166 Seminole Island DR.
83. City LARBO, FL
84. Zip Code 33773

11. Pursuant to the provisions of Sections 607.0501 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)

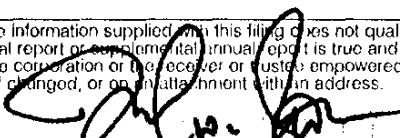
DATE

7/15/98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE → R. REITZ DAVID	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME REITZ, DAVID W		1.2 NAME	
STREET ADDRESS 707 ROBIN AVE		1.3 STREET ADDRESS 10166 SEMINOLE ISLAND DR.	
CITY-ST-ZIP PALM HARBOR FL 34683		1.4 CITY-ST-ZIP LARBO, FLA. 33773	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 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 on 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:



7/15/98 (833) 391-2242

CP2E034 (10/97)