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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101057 (2)
AGNES, INC.

FILED Mar 12 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 136 COLLINS AVENUE MIAMI BEACH FL 33139 136 COLLINS AVENUE MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1997 2a. Mailing Address 2, Principal Place of Business FEI Numbe Applied For *65-0800*320 Not Applicable 26 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name -CORPORATION SERVICE COMPANY UNG A201 HAYS STREET 82 TALLAHA88EE FL 32301-2525 83 84 BEACH 11. Pursuant to the provisions of Soctions 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 (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE 1.1 TITLE Addition TITLE PHUNG, TONY 1.2 NAME NAME **136 COLLINS AVENUE** 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-S1-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition

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 truestee ourspowded 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 written address.

4. 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CRY-ST-7IP

02/05/28

Change

Change

Addition

Addition