**FILED** . FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 23 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 P97000105935 (5) DOCUMENT # HARRY'S ELECTRONIC BILLING, INC. Principal Place of Business Mailing Address 980 74TH ST. NORTH 960 74TH ST. NORTH ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1997 2. Principal Place of Busingss 21 760-74 57 Suite, Apt #, etc. 4. FEI Number 2a. Mailing Address Applied For 960-74 PENPLING Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be ST. PETERS ST. PETER  $\Box$ 23 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible 65A Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent SLATER, JAMES L ESQ 36402 US HIGHWAY 19 N. 82 Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34684 В3 84 City Zip Code 85 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOT) Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE SEARFOSS, HARRY C 1.2 NAME NAME 960 74TH ST. NORTH 1.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL 33710 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2 2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE agithhA Change TITLE 3.1 TITLE NAME 32 NAME

14. Thereby 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 suppliemental 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.

3 3 STREET ADDRESS

3.4. CITY-ST-ZIP

4.4 CITY - ST- ZIP

53 STREET ADDRESS

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SIGNATURE:

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