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

PROFIT CORPORATION ANNUAL REPORT

1998



Golfue

9. Name and Address of Current Registered Agent

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000106901 (6)

FERRANTI SERVICES CO., INC.

25

DAYTONA BEACH FL 32114

FERRANTI, RICHARD

1236 GOLFVIEW DR.

Principal Place of Business

Suite, Apt. #, etc

City & State

21

22

1236 GOLEVIEW DR. DAYTONA BEACH FL 32114

2. Principal Place of Business 1236

Mailing Address

1236 GOLFVIEW DR. DAYTONA BEACH FL 32114

See

City & State

28

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Suite, Apt. #, etc.

291tom Boach

FILED Feb 19 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/19/1997 20. Mailing Address (236 Gotfum) 4. FEI Number Applied For 3481710 59 Not Applicable \$8.75 Additional П 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible R2U YZ Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 811 Name Street Address (P.O. Box Number is Not Acceptable) City Zip Code

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**

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Signature, lyped or printed name of registered agent and title it applicable (NOTE, Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TOTLE Change Addition Richard Ferranti NAME 1.2 NAME 1236 Grolfnian D 1.3 STREET ADDRESS STREET ADDRESS XAY40NA BER CITY-ST-ZIP 1.4 CITY-ST-ZIP L DELETE Change Addition 217ITLE TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 DITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST-ZIP CITY-ST-ZIP

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 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 tusies 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 attackment with an address. Block 12 or Block 13 if changed, or on an attachment