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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000004607					
1. Corporation Name FINANCIAL PLACEMENT SERVICES, INC.					
Principal Place of Business 12422 BERKLEY SQUARE TAMPA FL 33626			Mailing Address 12422 BERKLEY SQUARE TAMPA FL 33626		
2. Principal Place of Business					
21 Suite, Apt. #, etc.			2a. Mailing Address		
22 City & State			26 Suite, Apt. #, etc.		
23 Zip			27 City & State		
24 Country			28 Zip		
25 Country			29 Zip		
26 Country			30 Zip		
9. Name and Address of Current Registered Agent AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
85 Zip Code			86		
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 <i>John McIntosh</i> DATE 3/2/99					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
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 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.					



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1998

4. FEI Number

593489073

Applied For

Not Applicable

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 No

9. Name and Address of Current Registered Agent

 AMERILAWYER
 343 ALMERIA AVENUE
 CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

JOHN MCINTOSH

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

12422 BERKLEY SQ

83

84 City

Tampa

FL

85 Zip Code

33626

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TAMPA FL 33626

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TAMPA FL 33626

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

TAMPA FL 33626

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TAMPA FL 33626

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #