

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

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Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90034 042 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000014158

1. Corporation Name
EDWARDS AND EDWARDS INTERNATIONAL, INC.

Principal Place of Business 1090 FOREST CREEK DRIVE WINTER SPRINGS FL 32708	Mailing Address 1090 FOREST CREEK DRIVE WINTER SPRINGS FL 32708
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2242 Blossomwood DR Suite, Apt. #, etc.	2a. Mailing Address 26 2242 Blossomwood DR Suite, Apt. #, etc.
22 Oviedo, FL City & State	27 Oviedo, FL City & State
23 32765 Zip	28 32765 Zip
25 Country	29 Country

3. Date Incorporated or Qualified 02/11/1998	
4. FEI Number 59-3495615	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

EDWARDS, GEORGE F
1090 FOREST CREEK DRIVE
WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

81 Name GEORGE F. EDWARDS	
82 Street Address (P.O. Box Number is Not Acceptable) 2242 Blossomwood DR	
83 City Oviedo	
84 City Oviedo, FL	85 Zip Code 32765

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: *George F. Edwards* (NOTE: Registered Agent signature required when reinstating) DATE: 3/9/99

12. OFFICERS AND DIRECTORS

TITLE PRESIDENT, CEO	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT, CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME GEORGE F. EDWARDS	
1.3 STREET ADDRESS 2242 Blossomwood DR	
1.4 CITY-ST-ZIP Oviedo, FL 32765	
2.1 TITLE SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME VIOLA E. EDWARDS	
2.3 STREET ADDRESS 2242 Blossomwood DR	
2.4 CITY-ST-ZIP Oviedo, FL 32765	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

SIGNATURE: *George F. Edwards* DATE: 3/9/99
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)