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May 13, 1999 8:00 am
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05-13-1999 90020 016 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P98000019735 ✓
 1. Corporation Name
 DOWNTOWN DESPERADOS, INC.

Principal Place of Business: FLORIDA
 Mailing Address: C/O REGISTERED AGENT (BELOW)

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: March 2nd 1998
 4. FEI Number: 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

2. Principal Place of Business: 21
 Suite, Apt. #, etc.: 22
 City & State: 23
 Zip: 24
 Country: 25
 2a. Mailing Address: 26
 Suite, Apt. #, etc.: 27
 City & State: 28
 Zip: 29
 Country: 30

9. Name and Address of Current Registered Agent
 INCORPORATORS PLUS, INC.
 1214 N. UNIVERSITY DRIVE
 PLANTATION, FLA 33322

10. Name and Address of New Registered Agent
 81 Name: Will Lowler / B.C. LEATHER
 82 Street Address (P.O. Box Number is Not Acceptable): 3551 US 1 SOUTH, SUITE # 2
 83
 84 City: St AUGUSTINE FL 85 Zip Code: 32086

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] DATE: April 27 1999

12. OFFICERS AND DIRECTORS
 TITLE: VIVIANNE CARBALLO DELETE
 NAME: VIVIANNE CARBALLO
 STREET ADDRESS:
 CITY-ST-ZIP:
 [Empty rows with DELETE checkboxes]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
 1.1 TITLE: RICHARD BURSTROM Change Addition
 1.2 NAME: RICHARD BURSTROM
 1.3 STREET ADDRESS: VASTMANNAG. 81
 1.4 CITY-ST-ZIP: 113 26 STOCKHOLM
 [Empty rows with Change/Addition checkboxes]

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 in an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] RICHARD BURSTROM DATE: APRIL 27 1999
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/1/98)