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

PROFIT CORPORATION ANNUAL REPORT

1999

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

FILED
99 MAR -4 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000040844

1. Corporation Name

EPL COMPANY, INC.

Principal Place of Business / Mailing Address

1633 LAMPLIGHTER WY
ORLANDO, FL. 32818

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: MAY 6, 1998

4. FEI Number: [X] Applied For (If Applicable)

5. Certificate of Status Desired: [ ] $6.75 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 [X] No

2. Principal Place of Business	2a. Mailing Address
21 1633 LAMPLIGHTER WAY	26 1633 LAMPLIGHTER WAY
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ORLANDO, FL.	City & State 28 ORLANDO, FL
Zip 24 32818 Country 25 ORANGE	Zip 29 32818 Country 30 ORANGE

9. Name and Address of Current Registered Agent

JEANETTE PARADA
1633 LAMPLIGHTER WAY
ORLANDO, FL. 32818

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number Not Acceptable)
83
84 City FL 85 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: Jeanette Parada 3-1-99
(Signature typed or printed name of registered agent and title if applicable) (Date) (Signature required if changing registered agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D/P	11 TITLE	[ ] Change [ ] Add/Delete
NAME	JEANETTE PARADA	12 NAME	
STREET ADDRESS	1633 LAMPLIGHTER WAY	13 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL. 32818	14 CITY-ST-ZIP	
[ ] DELETE			
TITLE	D/S	21 TITLE	[ ] Change [ ] Add/Delete
NAME	JEANETTE PARADA	22 NAME	
STREET ADDRESS	1633 LAMPLIGHTER WAY	23 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL. 32818	24 CITY-ST-ZIP	
[ ] DELETE			
TITLE	D/T	31 TITLE	[ ] Change [ ] Add/Delete
NAME	JEANETTE PARADA	32 NAME	
STREET ADDRESS	1633 LAMPLIGHTER WAY	33 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO, FL. 32818	34 CITY-ST-ZIP	
[ ] DELETE			
TITLE		41 TITLE	[ ] Change [ ] Add/Delete
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
[ ] DELETE			
TITLE		51 TITLE	[ ] Change [ ] Add/Delete
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
[ ] DELETE			
TITLE		61 TITLE	[ ] Change [ ] Add/Delete
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

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****150.00 ****150.00

CR2E034 (11/98)

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: Jeanette Parada 3-1-99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)