


**FILED**  
**May 06, 1999 8:00 am**  
**Secretary of State**

05-06-1999 90238 027 \*\*\*158.75

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P98000041527</b> 1. Corporation Name <b>N. DIXIE BUSINESS, INC.</b>					
Principal Place of Business <b>5624 BOCA MARINA CIRCLE S</b> <b>BOCA RATON FL 33487</b>			Mailing Address <b>5624 BOCA MARINA CIRCLE S</b> <b>BOCA RATON FL 33487</b>		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business <b>21 5624 BOCA MARINA CIRCLE S</b>		2a. Mailing Address <b>26 5624 BOCA MARINA CIRCLE S</b>		3. Date Incorporated or Qualified <b>05/07/1998</b>	
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>		4. FEI Number <b>59-3512494</b>	
City & State <b>23 BOCA RATON, FL</b>		City & State <b>28 BOCA RATON, FL</b>		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip <b>24 33487</b>		Country <b>25 PALM BEACH</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Zip <b>29 33487</b>		Country <b>30 PALM BEACH</b>		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 <b>M &amp; W AGENTS, INC.</b> <b>2101 CORPORATE BLVD SUITE 216</b> <b>BOCA RATON FL 33431</b>			10. Name and Address of New Registered Agent <b>81 Name SPERBER, KENNETH</b> <b>82 Street Address (P.O. Box Number is Not Acceptable) 5264 BOCA MARINA CIRCLE S</b> <b>84 City BOCA RATON FL 85 Zip Code 33487</b>		
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>Kenneth Sperber</i> <b>KENNETH SPERBER</b> DATE <b>5/9/99</b>					
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition					
12.1 TITLE <b>D</b> 12.2 NAME <b>SPERBER, KENNETH</b> 12.3 STREET ADDRESS <b>5624 BOCA MARINA CIRCLE S</b> 12.4 CITY-ST-ZIP <b>BOCA RATON FL 33487</b>			13.1 TITLE <b>D</b> 13.2 NAME <b>SPERBER, KENNETH</b> 13.3 STREET ADDRESS <b>5264 BOCA MARINA CIRCLE S</b> 13.4 CITY-ST-ZIP <b>BOCA RATON, FL 33487</b>		
12.5 TITLE <input type="checkbox"/> DELETE 12.6 NAME 12.7 STREET ADDRESS 12.8 CITY-ST-ZIP			13.5 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY-ST-ZIP		
12.9 TITLE <input type="checkbox"/> DELETE 12.10 NAME 12.11 STREET ADDRESS 12.12 CITY-ST-ZIP			13.9 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY-ST-ZIP		
12.13 TITLE <input type="checkbox"/> DELETE 12.14 NAME 12.15 STREET ADDRESS 12.16 CITY-ST-ZIP			13.13 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY-ST-ZIP		
12.17 TITLE <input type="checkbox"/> DELETE 12.18 NAME 12.19 STREET ADDRESS 12.20 CITY-ST-ZIP			13.17 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 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: *Kenneth Sperber* **KENNETH SPERBER** DATE **4/8/99** (561) 445-7715  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (1/98)