

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

FILED
Apr 20, 1999 8:00 am
Secretary of State

04-20-1999 90255 015 ***150.00

0409962

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

DOCUMENT # P98000047328

1. Corporation Name
PURE POTENTIAL ENTERPRISES, INC.

Principal Place of Business 6249 18TH AVE N ST PETERSBURG FL 33710	Mailing Address 6249 18TH AVE N ST PETERSBURG FL 33710
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 111 2ND AVE N.E. Suite, Apt. #, etc. 22 Suite # 209 City & State 23 ST. Pete FL Zip 24 33701 Country 25 Pinellas	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30
---	--

3. Date Incorporated or Qualified 05/27/1998	4. FEI Number 59-3516550	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing <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 type="checkbox"/> No		

9. Name and Address of Current Registered Agent

BURNETT, JOHN
 166 20TH AVE SE
 ST PETERSBURG FL 33705-2814

10. Name and Address of New Registered Agent

81 Name Lorraine A. Stone
82 Street Address (P.O. Box Number is Not Acceptable) 6249-18th Ave N
83 ST. Pete FL 33710
84 City ST. Pete
85 Zip Code FL 33710

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		DELETED
TITLE	President / Sec.	<input type="checkbox"/>
NAME	Lorraine A. Stone	
STREET ADDRESS	6249-18th Ave N	
CITY-ST-ZIP	ST. Pete FL 33710	
TITLE	VICE Pres. / TREAS.	<input type="checkbox"/>
NAME	SUSAN D. HOKANSON	
STREET ADDRESS	4791 83RD TERR	
CITY-ST-ZIP	PINELLAS PK FL 33781	
TITLE	John Burnett	<input checked="" type="checkbox"/>
NAME	John Burnett	
STREET ADDRESS	166 20th Ave SE	
CITY-ST-ZIP	ST. Pete FL 33705-2814	
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		Change	Addition
1.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/>	<input type="checkbox"/>
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: Katherine Harris DATE: 4/16/99 DAYTIME PHONE #: 727-8226200

CR2E034 (11/98)