

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT 1999



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

FILED 99 DEC 23 AM 10:05 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P98000050189 Corporation Name

JAMES CONNAUGHTON INC.



9/8/99 90007 005 \$550.00 DO NOT WRITE IN THIS SPACE

Principal Place of Business: 306 N.E. 1ST STREET DEERFIELD BEACH FL 33441

3. Date incorporated or Qualified: 06/03/1998
4. FEI Number: 65-0844732
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property: Yes

9. Name and Address of Current Registered Agent: BOGGS, BRIAN K 4946 N.W. 50TH STREET COCONUT CREEK FL 33073

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code

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 607.0506, Florida Statutes.

NATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with columns: OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include James Connaughton and various officer entries with fields for title, name, address, and city-st-zip.

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(f), 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.

SIGNATURE: James Connaughton Date: 8-30-99 Daytime Phone #: 954-557-6053

CR2E034 (5/99)