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Secretary of State

04-27-1999 90163 038 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000052483			
1. Corporation Name CLUB LIVE HARD, INC.			
Principal Place of Business 4496 SOUTHSIDE BLVD. SUITE 100 JACKSONVILLE FL 32216		Mailing Address 4496 SOUTHSIDE BLVD. SUITE 100 JACKSONVILLE FL 32216	
DO NOT WRITE IN THIS SPACE			
3. Date Incorporated or Qualified 06/11/1998			
2. Principal Place of Business 21 2309 Beach Blvd. Suite, Apt. #, etc.		4. FEI Number 59-3517048	
22		Applied For No. Applicable	
23 City & State Jacksonville Beach, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip 32250		25 Country USA	
26 2309 Beach Blvd. Suite, Apt. #, etc.		27	
28 City & State Jacksonville Beach, FL		29 Zip 32250	
30 Country USA		31	
9. Name and Address of Current Registered Agent FILINGS, INC. 3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132		10. Name and Address of New Registered Agent 81 Name William E. Doyle Esquire 82 Street Address (P.O. Box Number is Not Acceptable) 1301 Riverside Blvd. 83 Suite 2600 84 City Jacksonville FL 85 Zip Code 32207	
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>Patrick Singletary</i> DATE 4-26-99 Signatures, typed or printed name of registered agent, and date if applicable. (NO E Registered Agent signature required when reappointing)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SINGLETARY, PATRICK	1.2 NAME	SAME
STREET ADDRESS	13613 MARSH HARBOUR DRIVE NORTH	1.3 STREET ADDRESS	318 4th St.
CITY-ST-ZIP	JACKSONVILLE FL 32225	1.4 CITY-ST-ZIP	Atlantic Beach, FL 32233
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	PST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADEEB, DAVID K	2.2 NAME	SAME
STREET ADDRESS	2245 EAGLES NEST ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32246	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *David Adeeb P.* DATE: 4-26-99 DAYTIME PHONE #: 904-759-6845

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/198)