

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

DOCUMENT # **PA8000076285**

Previous Metals Research Inc.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

77 Emerald Woods Dr
Apt I-9
Naples, FL 34108

Mailing Address
% KAREN HENCKY
9275 BONTA BEACH RD. SE
BONTA SPRINGS, FL 34135

2. Principal Place of Business

21. State of Incorporation

22. Country of Incorporation

23. Date of Incorporation

24. Country

25. Country

26. State of Incorporation

27. Country of Incorporation

28. Date of Incorporation

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2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

9/1/98

4. FEI Number

59-3571658

Applied For
Not Applicable

\$8.75 Additional
Fee Required

5. Certificate of Status Desired

[]

\$5.00 May Be
Added to Fees

6. Election Campaign Financing
Trust Fund Contribution

[]

8. This corporation owes the current year Intangible
Personal Property Tax

[X] Yes

[] No

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

Paul McLaughlin
77 Emerald Woods Dr Apt I-9
Naples, FL 34108

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 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 and accept the obligations of Section 607.0505, Florida Statutes.

12. (NOTE: Registered Agent signature required when reinstating)

DATE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

14. OFFICERS AND DIRECTORS

15. President

16. Paul McLaughlin

17. 77 Emerald Woods Dr Apt I-9

18. Naples, FL 34108

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11. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

31. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

41. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

51. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

61. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

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SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

karey hensley CPA PA

9275 Bonita Beach Rd. SE
Bonita Springs, FL. 34135
941/ 992/ 6060
Fax 992/ 9506
email: kfhcpa@aol.com

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October 6, 1999

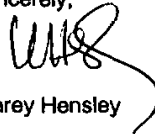
Annual Reports Filings
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sirs:

Enclosed please find Annual Report and filing fee. Please waive penalty due to the fact that I never received my annual report in the mail.

Thank You.

Sincerely,



Karey Hensley