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 # P98000078807

1. Corporation Name

LOCUS SCRIPTURAE INC

FILED Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90034 010 ***150.00

LOCUS	SOMETORAL, INC.			
Principal Place of Business Mailing Address				F 100 f(00) IIP JEER IDJII ADJIE BEITH ODEN ADJIE IDJUL EDJIE EDJIE EDJIE EDJIE EDJIE EDJIE EDJIE EDJIE EDJIE
23301 BUTTERFLY PALM CT 23301 BUTTERFLY PALM CT				
BOCA RATON FL 33433 BOCA RATON FL 33433				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				09/11/1998
2 Principal D	lace of Business	2a. Mailing Address		4 FEI Number Applied For
2. Principal Place of Business 2a. Mailing 2b. 2a. Mailing 2b. 2a.				65-0863345 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	p Country Zip Cou		Country	8. This corporation owes the current year Intangible
24	25	29 30	o]	Personal Property Tax.
	9. Name and Address of Current	t Registered Agent		10. Name and Address of New Registered Agent
			81 Name	Toylor T. Whitney
SHERMAN, JACQUELINE 82 S			82 Street Addr	ress P - Box Number is Not Acceptable)
23301 BUTTERFLY PALM CT			2.3	301 Butter Fly Halm CT
BOCA RATON FL 33433			83	
			84 City Boc	a Raton FL 85 Zip Code 33433
		- 1500 EL 14 OL 14	Doc	the in this statement for the purpose of changing its registered
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				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pulpose 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 objections of Section 607.0505, Florida Statutes.				
SIGNATURE	Tark 1. MM	Haylor T Wh	11/204)	ed when reinstating) DATE
	Signature, typed or printed name of registered agen		egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	PD	D DIRECTORS	13.	Change Addition
	SHERMAN, JACQUELINE		1.2 NAME	
NAME	23301 BUTTERFLY PALM CT		1.3 STREET ADDRESS	
STREET ADDRESS	BOCA RATON FL 33433		1.4 CITY-ST-ZIP	·
CITY-ST-ZIP	BUCA RATUN FL 33433	□ DELETE	2.1 TITLE	☐ Change ☐ Addition
TITLE			2.2 NAME	
NAME			2.3 STREET ADDRESS	
STREET ADDRESS	<u> </u>		2.4 CITY-ST-ZIP	·
_CITY-ST-ZIP		☐ DELETE	3.1 TITLE	Change Addition
NAME		<u></u>	3.2 NAME	
··· -			3.3 STREET ADDRESS	
STREET ADDRESS			3.4. CITY-ST-ZIP	
CITY-ST-ZIP		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS	İ		4.3 STREET ADDRESS	·
			4.4 CITY-ST-ZIP	
CITY-ST-ZIP		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	•
STREET ADDRESS	1		5.3 STREET ADDRESS	. • •
			5.4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
1			6.2 NAME	
NAME STREET ADDRESS			6.3 STREET ADDRESS	·
STREET ADDRESS			6.4 CITY-ST-ZIP	İ
CITY-ST-ZIP	I		E	

CITY-ST-ZIP 14. 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 coporation 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 chapted, or on an attachment with an address, with all other like empowered.

SIGNATURE: