

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

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90027 043 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000087310

1. Corporation Name

ME NO FRY SOLAR PROTECTIVE GEAR, INC.



Principal Place of Business 420 LINCOLN ROAD SUITE 600 MIAMI BEACH FL 33139	Mailing Address 420 LINCOLN ROAD SUITE 600 MIAMI BEACH FL 33139
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 10/13/1998	
		4. FEI Number		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution		<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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent NEUSTEIN, CHARLES L 420 LINCOLN ROAD SUITE 600 MIAMI BEACH FL 33139				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	
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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		Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS					
TITLE	D	DELETED		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	DIAZ, LOURDES			1.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	420 LINCOLN ROAD SUITE 600			1.2 NAME	
CITY-ST-ZIP	MIAMI BEACH FL 33139			1.3 STREET ADDRESS	
TITLE	D	DELETED		1.4 CITY-ST-ZIP	
NAME	ERLINGER, ELIZABETH			2.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	420 LINCOLN ROAD SUITE 600			2.2 NAME	
CITY-ST-ZIP	MIAMI BEACH FL 33139			2.3 STREET ADDRESS	
TITLE	D	DELETED		2.4 CITY-ST-ZIP	
NAME	ERLINGER, BLASIU			3.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	420 LINCOLN ROAD SUITE 600			3.2 NAME	
CITY-ST-ZIP	MIAMI BEACH FL 33139			3.3 STREET ADDRESS	
TITLE	D	DELETED		3.4 CITY-ST-ZIP	
NAME	WEITMAN, PETER			4.1 TITLE	Vice - President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	420 LINCOLN ROAD SUITE 600			4.2 NAME	
CITY-ST-ZIP	MIAMI BEACH FL 33139			4.3 STREET ADDRESS	
TITLE		DELETED		4.4 CITY-ST-ZIP	
NAME				5.1 TITLE	
STREET ADDRESS				5.2 NAME	
CITY-ST-ZIP				5.3 STREET ADDRESS	
TITLE		DELETED		5.4 CITY-ST-ZIP	
NAME				6.1 TITLE	
STREET ADDRESS				6.2 NAME	
CITY-ST-ZIP				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:  **1/5/99** **305 8671771**
Date Daytime Phone #

CR2E034 (1/98)