

DOCUMENT # P98000102663

1. Entity Name

ANNE FRANCIS INC

80029456

Principal Place of Business	Mailing Address
1500 S. OCEAN DR., SUITE 7C HOLLYWOOD FL 33019	1500 S. OCEAN DR., SUITE 7C HOLLYWOOD FL 33019-2336

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	65-0892800	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
MILLER, GERALD 1500 S. OCEAN DR., SUITE 7C HOLLYWOOD FL 33019		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL

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

<p>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/></p>	<p>FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State</p>	<p>10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div> <input checked="" type="checkbox"/> Delete </div> P MILLER, GERALD 1500 S. OCEAN DR., SUITE 7C HOLLYWOOD FL 33019	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div> <input type="checkbox"/> Delete </div>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/00 954 926 5413
Date Daytime Phone #

CR2E034 (9/99)