

4-21-98 D5243 MC
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 21 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # S03483 (2)
 1. Corporation Name
FIDELITY MAINTENANCE CORPORATION



Principal Place of Business: 18860 US HWY 19 N, STE. 159, CLEARWATER FL 34624 US

Mailing Address: 18860 US HWY 19 N, STE. 159, CLEARWATER FL 34624 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 18830 US Hwy 19 N.
 Suite, Apt. #, etc. 22 SUITE 332
 City & State 23 CLEARWATER, FL
 Zip 24 33764 Country 25 USA

2a. Mailing Address
 26 18830 US Hwy 19 N
 Suite, Apt. #, etc. 27 332
 City & State 28 CLEARWATER, FL
 Zip 29 33764 Country 30 USA

3. Date Incorporated or Qualified: 09/25/1990

4. FEI Number: 59-3033644

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
SELKOW, ED
FIDELITY MAINTENANCE CORPORATION
18860 U.S. HIGHWAY 19 NO. STE. 159
CLEARWATER FL 34624

CHANGED

10. Name and Address of New Registered Agent

81 Name: SELKOW, ED
 82 Street Address (P.O. Box Number is Not Acceptable): FIDELITY MAINTENANCE CORPORATION
 83 18830 US HWY 19 N
 84 City: CLEARWATER FL 85 Zip Code: 33764

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: ED SELKOW, PRESIDENT *[Signature]* DATE: 4/13/98

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	SELKOW, ED	
STREET ADDRESS	274 ARBOR DR. EAST	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	V	<input type="checkbox"/> DELETE
NAME	URENA, LUIS	
STREET ADDRESS	2213 CITRUS VALLEY CIR.	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	S	<input type="checkbox"/> DELETE
NAME	SELKOW, CINDY	
STREET ADDRESS	274 ARBOR DR. EAST	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	T	<input type="checkbox"/> DELETE
NAME	URENA, CLARA	
STREET ADDRESS	2213 CITRUS VALLEY CIR.	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
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.

SIGNATURE: *[Signature]* (813)534-0049

CR2E034 (10/97)