

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

FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S16218 (7)
 1. Corporation Name
LAMB ENTERPRISES, INC.



Principal Place of Business 37 SPANISH MAIN ST TAMPA FL 33609	Mailing Address 37 SPANISH MAIN ST TAMPA FL 33609
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 111 S. Armenia Ave.		2a. Mailing Address 26 111 S. Armenia Ave.		3. Date Incorporated or Qualified 11/08/1990
Suite, Apt. #, etc. 22 Suite 100		Suite, Apt. #, etc. 27 Suite 100		4. FEI Number 59-3056615
City & State 23 Tampa, FL		City & State 28 Tampa, FL		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24 33609	Country 25 Hillsborough	Zip 29 33609	Country 30 Hillsborough	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent BENNATI, ALVIN A. SR. 1719 W KENNEDY BLVD. TAMPA FL 33606				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No
				10. Name and Address of New Registered Agent

				81 Name
				82 Street Address (P.O. Box Number is Not Acceptable) 111 S. Armenia Ave
				83 Suite 100
				84 City Tampa, FL 85 Zip Code 33609

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BENNATI, MARJORIE		1.2 NAME	
STREET ADDRESS 1719 W KENNEDY BLVD		1.3 STREET ADDRESS 111 S. Armenia Ave. Suite 100	
CITY-ST-ZIP TAMPA FL		1.4 CITY-ST-ZIP Tampa, FL 33609	
TITLE STD	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BENNATI, ALVIN A., SR.		2.2 NAME	
STREET ADDRESS 1719 W KENNEDY BLVD		2.3 STREET ADDRESS 111 S. Armenia Ave. Suite 100	
CITY-ST-ZIP TAMPA FL		2.4 CITY-ST-ZIP Tampa, FL 33609	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Alvin A. Bennati* **4/8/98** **813-873-1999**

CR2E034 (10/97)