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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # S22641

1. Corporation Name

A-AL-GATOR, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business

17 W ST RD 84  
P.O. BOX 22856  
FT LAUDERDALE FL 33315  
US

Mailing Address

2664 PALM ER PALCE  
ATTN: MARIA BOYLE  
FT LADUERDALE FL 33332  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip 30 Country

3. Date incorporated or Qualified

01/04/1991

4. FEI Number

65-0233503

Applied For

Not Applicable

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 the current year Intangible Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

BURGUN-BOYLE, MARIA  
17 W STATE RD 84  
FT LAUDERDALE FL 33315

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

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 of 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 P [ ] DELETE  
NAME BOYLE-BURGUN, MARIA A  
STREET ADDRESS 2664 PALMER PL  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE V [ ] DELETE  
NAME BURGUN, JOHN  
STREET ADDRESS 2664 PALMER PL  
CITY-ST-ZIP FT LAUDERDALE FL

TITLE [ ] DELETE  
NAME BURGUN-BOYLE, MARIA  
STREET ADDRESS 17 W STATE RD 84  
CITY-ST-ZIP FT LAUDERDALE FL 33315

TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE [ ] Change [ ] Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE [ ] Change [ ] Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE [ ] Change [ ] Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE [ ] Change [ ] Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE [ ] Change [ ] Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE [ ] Change [ ] 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

1/13/99

#954384.9425

Daytime Phone #

CR2E034 (11/98)