

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



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

DOCUMENT # **S27610** (2)  
1. Corporation Name  
**COLOR GARDEN, INC.**

Principal Place of Business

**5596 WESTERN WAY  
LAKE WORTH FL 33463  
US**

Mailing Address

**5596 WESTERN WAY  
LAKE WORTH FL 33463  
US**

FILED  
Jul 28 1998 8:00am  
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	<b>5596 Western Way</b>	26	<b>SAME</b>	<b>01/25/1991</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
				<b>65-0242234</b>	
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required	
23	<b>Lake Worth FL</b>	28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
24	Zip	29	Country	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	
<b>33463</b>		<b>Palm Bch.</b>	<b>USA</b>		

9. Name and Address of Current Registered Agent

**CRAWFORD, PAMELA  
6878 THORNHILL COURT  
BOCA RATON FL 33433**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 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)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CRAWFORD, PAMELA</b>	1.2 NAME	
STREET ADDRESS	<b>5596 WESTERN WAY</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>LAKE WORTH FL</b>	1.4 CITY-ST-ZIP	
TITLE		2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		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		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		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		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

**Pamela Crawford**

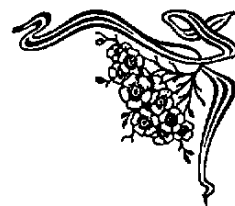
**PAMELA CRAWFORD 7-14-98 (5/11) 9/14-1500**

CR2E034 (5/98)



# Color Garden

5596 Western Way  
Lake Worth, FL 33463  
Telephone (561) 964-6500



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July 14, 1998

Dear Sirs:

Enclosed please find our completed 1998 Profit Corporation Annual Report along with our check for \$150.00. We apologize for our late filing, but we never received our original paperwork from your offices. Upon receiving your second notice, I called and spoke to one of your representatives and was advised to respond immediately along with a letter of explanation. If you have any questions, please contact me at (561) 964-6500.

Thank you in advance for your consideration in this matter.

Sincerely,

*Cindy Corum*

Cindy Corum  
Office manager  
Color Garden, Inc.