

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

FILED
Mar 05 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 # S37865 (0)
1. Corporation Name
CINLIDO, INC.



Principal Place of Business 448 HARRISON AVE. PANAMA CITY FL 32401 US	Mailing Address 2353 FOXWORTH DR. PANAMA CITY FL 32405 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 03/01/1991	4. FEI Number 59-3061220	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent DAVIS, GEORGE E. 2353 FOXWORTH DRIVE PANAMA CITY FL 32405	10. Name and Address of New Registered Agent 81 Name DAVIS, GEORGE E. 82 Street Address (P.O. Box Number is Not Acceptable) 1 EMERALD LAKE DR. 83 City PANAMA CITY BEACH 84 State FL 85 Zip Code 32407
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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:  DATE: 2/21/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	PCEO
NAME	DAVIS, DONNA M
STREET ADDRESS	2353 FOXWORTH DR.
CITY-ST-ZIP	PANAMA CITY FL
TITLE	D
NAME	SKINNER, LORNE S.
STREET ADDRESS	13172 POWAY HILLS DR.
CITY-ST-ZIP	POWAY CA
TITLE	D
NAME	FETTIG, ROBERT A.
STREET ADDRESS	4081 SINGING POST LANE
CITY-ST-ZIP	ROSWELL GA
TITLE	D
NAME	DAVIS, GEORGE E
STREET ADDRESS	2353 FOXWORTH DR.
CITY-ST-ZIP	PANAMA CITY FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	1 EMERALD LAKE DR
1.4 CITY-ST-ZIP	PANAMA CITY BEACH, FL. 32407
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 checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	1 EMERALD LAKE DR
3.4 CITY-ST-ZIP	PANAMA CITY BEACH, FL. 32407
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	1 EMERALD LAKE DR
4.4 CITY-ST-ZIP	PANAMA CITY BEACH, FL. 32407
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:  DATE: 2/21/98 850-230-5555

CR2E034 (10/97)