

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

FILED

Apr 13 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 # S55308 (8)
1. Corporation Name
ESI BRADY, INC.

Principal Place of Business 11760 US HIGHWAY ONE SUITE 600 NORTH PALM BEACH FL 33408	Mailing Address 11760 US HIGHWAY ONE SUITE 600 NORTH PALM BEACH FL 33408
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/24/1991	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	30	4. FEI Number 65-0265430	Applied For Not Applicable
22 City & State	27	28 City & State	30	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23 Zip	25 Country	29 Zip	30 Country	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 LEON, J E 9250 WEST FLAGLER STREET MIAMI FL 33174				10. Name and Address of New Registered Agent	

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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	DV	1.1 TITLE	DT
NAME	CARPENTER, LARRY K	1.2 NAME	BOYLAN, PETER
STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600	1.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	1.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	DV	2.1 TITLE	AS
NAME	GELBER, LESLIE J	2.2 NAME	HATHAWAY, SCOT C
STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600	2.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	2.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	T	3.1 TITLE	AS
NAME	MCGRATH, ROBERT L	3.2 NAME	PONDER, STEPHEN H
STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600	3.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	3.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	DP	4.1 TITLE	AS
NAME	HOFFMAN, KENNETH S	4.2 NAME	TANCER, EDWARD F
STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600	4.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	4.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE	S	5.1 TITLE	DP
NAME	CARPENTER, FRANCES M	5.2 NAME	GELBER, LESLIE J.
STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600	5.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP	NORTH PALM BEACH FL 33408	5.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408
TITLE		6.1 TITLE	DV
NAME		6.2 NAME	HOFFMAN, KENNETH S
STREET ADDRESS		6.3 STREET ADDRESS	11760 US HIGHWAY ONE SUITE 600
CITY-ST-ZIP		6.4 CITY-ST-ZIP	NORTH PALM BEACH FL 33408

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: FRANCES M CARPENTER, SECRETARY *Frances M. Carpenter* 2/5/98 (561) 691-3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 6314331

CR2E034 (10/97)