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

FILED Mar 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # S83991 MEA GROUP, INC. Principal Place of Business Mailing Address 3859 BEE RIDGE ROAD 3859 BEE RIDGE ROAD SARASOTA FL 34233 SARASOTA FL 34233 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/30/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 5971 CATTLERIOGE BLUD 65-0287818 5971 (ATTUERIOGE Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 100 100 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be FL F SARASOTA SARASOTA 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No S ARASOTA 34232 25 SARA5 41 A 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RUBINO, GEORGE 3859 BEE RIDGE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) 5971 CATTLERIOGE BLUD SARASOTA FL 34233 83 100 SUITE 84 City Zip Code SARASOTA 34232 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change THLE 1.1 TITLE NAME RUBINO, GEORGE 1.2 NAME STREET ADDRESS 3859 BEE RIDGE ROAD 1.3 STREET ADDRESS SARASOTA FL CITY-S1-2IP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE CD 21 TITLE HAKOS, WILLIAM J. NAME 2.2 NAME 12450 PERRY HIGHWAY STREET ADDRESS 2.3 STREET ADDRESS **WEXFORD PA** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE Change TITLE NAME CUMMINGS, STEVEN W. 3.2 NAME 12450 PERRY HIGHWAY STREET ADDRESS 3.3 STREET ADDRESS WEXFORD PA CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE RHODES, RALPH J. NAME 4. 2 NAME STREET ADDRESS 3859 BEE RIDGE ROAD 4.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE PATTERSON, LINDAH. NAME 5.2 NAME 5971 CATTLEAIOLE BLUD, SHITE 100 STREET ADDRESS 5.3 STREET ADDRESS SARAJUTA, FL 34232

14. I hereby cortify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this annual report or suppliemental 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 chapter 607 or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CHTY-ST-ZIP

STREET ADDRESS

TITLE

NAME

18 98

Change

Addition