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

CITY-ST-ZIF

SIGNATURE:

Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9)NATIONAL EQUITIES CORP., S.A. Principal Place of Business Mailing Address 2901 MIDDLE RIVER DRIVE 2901 MIDDLE RIVER DRIVE FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/13/1992 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 65-0304752 Not Applicable 21 Suite, Apt. #, etc Suite Arit #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 30 Personal Property Tax due June 30. 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DIFRANCESCO, HARRY F. 2901 MIDDLE RIVER DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33306 83 64 City 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DETETE Addition TITLE 1.1 TITLE Change DIFRANCESCO, HARRY F. 12 NAME 2901 MIDDLE RIVER DRIVE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY ST ZIP 2 4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3 4. CITY - ST - ZIP DELFIE Change Addition 4.1 THILE TITLE NAME 4.2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-SI-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 THILE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

14. Thereby 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 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes: and that my name appears in

FILED

4-21-98 (954)630-0670