

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

FILED
Apr 22 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 # V20416 (6)

1. Corporation Name
THE JOURNEY CORPORATION

Principal Place of Business 10127 SUNSET DR. MIAMI FL 33173 US	Mailing Address 10127 SUNSET DR. MIAMI FL 33173 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

3. Date Incorporated or Qualified 03/12/1992	Applied For <input type="checkbox"/> Not Applicable
4. FEI Number 65-0324558	
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 type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PREVITI, PETER
5825 SUNSET DRIVE
SUITE 210
SOUTH MIAMI FL 33143

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 _____ DATE _____
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	NAME	11 TITLE	12 NAME
<input type="checkbox"/> DELETE	D SAMPSON, M.T. CHERE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	10127 SUNSET DR.		13 STREET ADDRESS
	MIAMI FL		14 CITY-ST-ZIP
<input type="checkbox"/> DELETE	D SENZIG, MICHAEL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	10127 SUNSET DR.		21 TITLE
	MIAMI FL		22 NAME
<input type="checkbox"/> DELETE	D YEE KEE, DEBORAH	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	10127 SUNSET DR.		23 STREET ADDRESS
	MIAMI FL		24 CITY-ST-ZIP
<input type="checkbox"/> DELETE	D YOUNG, CAROL	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	10127 SUNSET DRIVE		31 TITLE
	MIAMI FL		32 NAME
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
			33 STREET ADDRESS
			34 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
			41 TITLE
			42 NAME
			43 STREET ADDRESS
			44 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
			51 TITLE
			52 NAME
			53 STREET ADDRESS
			54 CITY-ST-ZIP
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
			61 TITLE
			62 NAME
			63 STREET ADDRESS
			64 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: *Deborah Yee Kee* **DEBORAH YEEKEE** 4/13/98 305-595-3459

CP2E034 (10/97)