

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

FILED
Mar 30 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V25270 (2)

1. Corporation Name
TEASERS CONCEPT, INC.

Principal Place of Business
7992 W. GULF TO LAKE HIGHWAY
CRYSTAL RIVER FL 32629

Mailing Address
7992 W. GULF TO LAKE HIGHWAY
CRYSTAL RIVER FL 32629



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 726 SE US HIGHWAY 19 Suite, Apt. #, etc.	25 726 SE US HIGHWAY 19 Suite, Apt. #, etc.
22 SUITE #7 City & State	27 SUITE #7 City & State
23 CRYSTAL RIVER, FL Zip Country	28 CRYSTAL RIVER, FL Zip Country
24 34429 25 CITRUS	29 34429 30 CITRUS

3. Date Incorporated or Qualified	Applied For
03/25/1992	Not Applicable
4. FEI Number	5. Certificate of Status Desired
59-3117258	<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	10. Name and Address of New Registered Agent
PRIEST, VIVA SUE 7992 W. GULF TO LAKE HIGHWAY CRYSTAL RIVER FL 32629	81 Name
	82 Street Address (P.O. Box Number is Not Acceptable)
	726 SE US HIGHWAY 19, SUITE #7
	83
	84 City
	CRYSTAL RIVER FL 85 Zip Code
	34429

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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	1.1 TITLE
D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PRIEST, VIVA SUE	1.2 NAME
7992 W. GULF TO LAKE HWY	1.3 STREET ADDRESS
CRYSTAL RIVER FL	726 SE US HIGHWAY 19, SUITE #7
CITY-ST-ZIP	CRYSTAL RIVER, FL 34429
TITLE	1.4 CITY-ST-ZIP
D	2.1 TITLE
PRIEST, CHARLES WAYNE, JR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
7992 W. GULF TO LAKE HWY	2.2 NAME
CRYSTAL RIVER FL	2.3 STREET ADDRESS
CITY-ST-ZIP	726 SE US HIGHWAY 19, SUITE #7
TITLE	2.4 CITY-ST-ZIP
	CRYSTAL RIVER, FL 34429
	3.1 TITLE
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3.2 NAME
	3.3 STREET ADDRESS
	3.4 CITY-ST-ZIP
	4.1 TITLE
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	4.2 NAME
	4.3 STREET ADDRESS
	4.4 CITY-ST-ZIP
	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:

[Signature] 3/25/98 352-2951102

CR2E034 (10/97)