

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

FILED
Apr 15 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 # **V28903** (5)
1. Corporation Name
CONCEPTS & DIMENSIONS INC.

Principal Place of Business 700 NW 57 PL STE 2 FT LAUDERDALE FL 33309 US	Mailing Address 700 NW 57 PL STE 2 FT LAUDERDALE FL 33309 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/10/1992	4. FEI Number 65-0336508	Applied For <input type="checkbox"/> Not Applicable
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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9. Name and Address of Current Registered Agent

**PHILLIPS, CHRISTINE
5100 NE 28 TERRACE
LIGHTHOUSE POINT FL 33064**

10. Name and Address of New Registered Agent

81 Name Anthony M. Livoti, Jr. ESQ.	82 Street Address (P.O. Box Number is Not Acceptable) 721 N.E. 3rd Ave., J.
83 City Ft. Lauderdale, Fl	84 Zip Code FL 33304

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 607.0502, Florida Statutes.

SIGNATURE

Anthony M. Livoti, Jr.

3.30.97

(NOTE: Registered Agent Signature required when filing initial registration)

12. OFFICERS AND DIRECTORS

TITLE P	NAME PHILLIPS, CHRISTINE	<input type="checkbox"/> DELETE
STREET ADDRESS 5100 NE 28 TERRACE		
CITY-ST-ZIP LIGHTHOUSE POINT FL		
TITLE 	NAME 	<input type="checkbox"/> DELETE
STREET ADDRESS 		
CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> DELETE
STREET ADDRESS 		
CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> DELETE
STREET ADDRESS 		
CITY-ST-ZIP 		
TITLE 	NAME 	<input type="checkbox"/> DELETE
STREET ADDRESS 		
CITY-ST-ZIP 		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/S/T/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME Phillips, Christine	
1.3 STREET ADDRESS 700 NW 57 PL. Suite 2	
1.4 CITY-ST-ZIP Ft. Lauderdale, Fl 33309	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE VP	
2.2 NAME Rose Eck	
2.3 STREET ADDRESS 700 NW 57 Pl. Suite 2	
2.4 CITY-ST-ZIP Ft. Lauderdale, Fl. 33309	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: **CHRISTINE PHILLIPS** **3.30.98 944 351-0661**

CR2E034 (10/97)