

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90024 028 ***150.00

DOCUMENT # 439654

1. Corporation Name ZYDECO INVESTMENTS, INC.

Principal Place of Business

Mailing Address

387 EAGLE DRIVE 7251 PALMETTO PARK #200
JUPITER, FL 33477 BOCA RATON, FL 33433

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified

5/28/92

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 1220 US Hwy 1	26 1220 US Hwy 1	65-0336868	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
22 SUITE B	27 SUITE B	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		
23 NORTH PALM BEACH FL	28 NORTH PALM BEACH FL	6. Election Campaign Financing	\$5.00 May Be Added to Fees
Zip	Zip	Trust Fund Contribution	
24 33408	29 33408	8. This corporation owes the current year Intangible Personal Property Tax.	Yes No
Country	Country		
25 USA	30 USA		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CROWN, NANCY E.
7251 W. PALMETTO PARK ROAD
SUITE 200
BOCA RATON, FL 33433

81 Name	MARTIN ATKINS
82 Street Address (P.O. Box Number is Not Acceptable)	1220 US HIGHWAY 1
83	SUITE B
84 City	NPB FL FL
85 Zip Code	33408

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)

DATE

3/12/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	OFFICER	1.1 TITLE	MARTIN ATKINS
NAME	MARTIN ATKINS	1.2 NAME	
STREET ADDRESS	387 EAGLE DRIVE	1.3 STREET ADDRESS	1220 US HWY 1 SUITE B
CITY-ST-ZIP	JUPITER, FL 33477	1.4 CITY-ST-ZIP	N.P.B., FL 33408
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/12/99 561-776-1414

CR2E034 (11/98)