

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

FILED
May 11 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 # **V65919** (5)
1. Corporation Name
FLORIDA DRAGLINE SERVICES, INC.



Principal Place of Business 11100 ASTRONAUT BLVD ORLANDO FL 32837 US	Mailing Address 11100 ASTRONAUT BLVD ORLANDO FL 32837 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 1621 N. Mills Ave Suite, Apt. #, etc. 22 City & State 23 ORLANDO FL Zip 24 32803 Country 25		2a. Mailing Address 26 SOME AS 2 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 09/23/1992	4. FEI Number 59-3148995 Applied For 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 type="checkbox"/> Yes <input type="checkbox"/> No					

9. Name and Address of Current Registered Agent EURE, CLAUDE 11100 ASTRONAUT BLVD ORLANDO FL 32837				10. Name and Address of New Registered Agent 81 Name Robert T. Roth 82 Street Address (P.O. Box Number is Not Acceptable) 1621 N. Mills Ave 83 84 City ORLANDO FL 85 Zip Code 32803	
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11. Pursuant to the provisions of Sections 607.0505 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  (NOT: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
	D EURE, CLAUDE	11100 ASTRONAUT BLVD	ORLANDO FL				
	VP						
	ROTH, ROBERT T	11100 ASTRONAUT BLVD	ORLANDO FL	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
				3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
				4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
				5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
				6.1 TITLE	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 officer 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:  4-25-98 407-894-9515

CR2E034 (10/97)