


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

FILED
Apr 24 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 # **V71140** (0)
1. Corporation Name
CAPITAL ASSET RESEARCH CORPORATION



Principal Place of Business 1700 PALM BEACH LAKES BLVD SUITE 1100 WEST PALM BEACH FL 33401 US	Mailing Address 1700 PALM BEACH LAKES BLVD SUITE 1100 WEST PALM BEACH FL 33401 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 3950 RCA Blvd. Suite, Apt. #, etc. 22 Suite 5001 City & State 23 Palm Beach Gardens, FL Zip 24 33410 Country 25 USA	2a. Mailing Address 26 3950 RCA Blvd. Suite, Apt. #, etc. 27 Suite 5001 City & State 28 Palm Beach Gardens, FL Zip 29 33410 Country 30 USA	3. Date Incorporated or Qualified 10/14/1992	4. FEI Number 65-0375421 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

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD
NAME	HEITMEYER, RICHARD
STREET ADDRESS	1335 PALM BEACH LAKES BLVD
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	VD
NAME	GILBERT, SHELTON
STREET ADDRESS	1855 PALM BEACH LAKES BLVD SUITE 1006
CITY-ST-ZIP	WEST PALM BEACH FL 33411
TITLE	XSR
NAME	RAMSEY, JOHN E
STREET ADDRESS	3414 PEACHTREE RD STE 660
CITY-ST-ZIP	ATLANTA GA
TITLE	T
NAME	GREETHAM, DONALD
STREET ADDRESS	X700 PALM BEACH LAKES BLVD STE 1100
CITY-ST-ZIP	W PALM BEACH FL 33411
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3950 RCA Blvd. Suite 5001
1.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33410
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	3950 RCA Blvd. Suite 5001
2.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33410
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VP
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	3950 RCA Blvd. Suite 5001
4.4 CITY-ST-ZIP	Palm Beach Gardens, Florida 33410
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.

Donald Greetham, Treasurer

SIGNATURE:

04/16/98

561-515-1000

CR2E034 (10/97)