

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

FILED
Apr 14 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V71887 (6)

1. Corporation Name
MOB EQUITY CORPORATION

Principal Place of Business 1200 CORPORATE CENTER WAY SUITE 100 WEST PALM BEACH FL 33414 US	Mailing Address 1200 CORPORATE CENTER WAY SUITE 100 WEST PALM BEACH FL 33414 US
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2. Principal Place of Business 21 3801 PGABLD Suite, Apt. #, etc. 22 SUITE 1000 City & State 23 Palm Beach Gardens, FL Zip 24 33410	2a. Mailing Address 25 3801 PG + BLD Suite, Apt. #, etc. 26 SUITE 1000 City & State 27 Palm Beach Gardens, FL Zip 28 33410
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g. Name and Address of Current Registered Agent

JURAN, LAWRENCE B ESQUIRE
1200 CORP CENTER WAY
STE 100
W PALM BCH FL 33414

DO NOT WRITE IN THIS SPACE


3. Date Incorporated or Qualified 10/16/1992	4. FEI Number 65-0369446	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	7. 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

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83 3801 PGA Boulevard, Suite 1000	84 City	85 Zip Code
		Palm Beach Gardens, FL 33410	FL	

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

3/23/98

12. OFFICERS AND DIRECTORS


TITLE	D	DELETE
NAME	RENDINA, BRUCE	
STREET ADDRESS	1200 CORPORATE CENTER WAY, #100	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	D	DELETE
NAME	SANDS, DONALD A.	
STREET ADDRESS	1200 CORPORATE CENTER WAY, #100	
CITY-ST-ZIP	WEST PALM BEACH FL	
TITLE	V	DELETE
NAME	DISALVO, PATRICK J	
STREET ADDRESS	1200 CORPORATE CENTER WAY #100	
CITY-ST-ZIP	WEST PALM BCH FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
		3801 PGA Boulevard, Suite 1000	Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
		3801 PGA Boulevard, Suite 1000	Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
		3801 PGA Boulevard, Suite 1000	Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>

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:

 3-24-98 561-691-9900

CR2E034 (10/97)