

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 # V73103 (6) 1. Corporation Name RHYTHM TECHNOLOGIES, INC.

Principal Place of Business 7400 BAYMEADOWS WAY 104 JACKSONVILLE FL 32256 US	Mailing Address 7400 BAYMEADOWS WAY 104 JACKSONVILLE FL 32256 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 7901 BAYMEADOWS WAY Suite, Apt. #, etc. 22 5 City & State 23 JACKSONVILLE, FLORIDA Zip 24 32256 Country 25 USA		2a. Mailing Address 26 7901 BAYMEADOWS WAY Suite, Apt. #, etc. 27 5 City & State 28 JACKSONVILLE, FLORIDA Zip 29 32256 Country 30 USA		3. Date Incorporated or Qualified 10/19/1992
		4. FEI Number 65-0368848	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 type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent LUCERI, RICHARD M. 2366 NE 28TH STREET LIGHTHOUSE POINT FL 33064		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	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PSD	<input type="checkbox"/> DELETE	1.1 TITLE CD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LUCERI, RICHARD M MD		1.2 NAME LUCERI, RICHARD M MD	
STREET ADDRESS 2366 NE 28TH ST		1.3 STREET ADDRESS 2366 NE 28th ST	
CITY-ST-ZIP LIGHTHOUSE POINT FL		1.4 CITY-ST-ZIP lighthouse Point, FL 33064	
TITLE V	<input type="checkbox"/> DELETE	2.1 TITLE PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME ACCORTI, PETER R		2.2 NAME ACCORTI, PETER R	
STREET ADDRESS 3544 W BATEAU ROAD		2.3 STREET ADDRESS 12202 Lashbrook CT	
CITY-ST-ZIP JACKSONVILLE FL		2.4 CITY-ST-ZIP JACKSONVILLE, FL 32223	
TITLE T	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HAINES, TIMOTHY J		3.2 NAME	
STREET ADDRESS 2366 NE 28TH STREET		3.3 STREET ADDRESS	
CITY-ST-ZIP LIGHTHOUSE POINT FL		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

SIGNATURE:  **Peter R. Accorti** 21 APR - 98 (904) 733-9486

CR2E034 (10/97)