


SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED  
 AND  
 FILED

97 JUL 30 AM 9:31

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000081229 (2)  
 1. Corporation Name  
**SEVEN MARY THREE, INC.**



Principal Place of Business 631 PALM SPRINGS DRIVE #117 ALTAMONTE SPRINGS FL 32701	Mailing Address 631 PALM SPRINGS DRIVE #117 ALTAMONTE SPRINGS FL 32701
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 21835 Lake Seneca Rd. Suite, Apt. #, etc.	2a. Mailing Address 26 111 Second Ave. NE Suite, Apt. #, etc. 27 Suite 1200	3. Date Incorporated or Qualified 10/01/1996	3a. Date of Last Report N/A
22 City & State 23 Eustis, FL	27 City & State 28 St. Petersburg, FL	4. FEI Number 59-3403673	Applied For Not Applicable
24 Zip 32726	25 Country USA	29 Zip 33701	30 Country USA
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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent  
**MASSARONI, DARREL R**  
 631 PALM SPRINGS DRIVE #117  
 ALTAMONTE SPRINGS FL 32701

10. Name and Address of New Registered Agent  
 81 Name  
**Massaroni, Darrel R**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**21835 Lake Seneca Rd.**  
 83  
 84 City  
**Eustis** FL 85 Zip Code  
**32726**

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

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	<b>D Jason Ross</b>
1.3 STREET ADDRESS	<b>21835 Lake Seneca Rd.</b>
1.4 CITY-ST-ZIP	<b>Eustis, FL 32726</b>
2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	<b>D Jason Pollock</b>
2.3 STREET ADDRESS	<b>21835 Lake Seneca Rd.</b>
2.4 CITY-ST-ZIP	<b>Eustis, FL 32726</b>
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>D Giti Khalsa</b>
3.3 STREET ADDRESS	<b>21835 Lake Seneca Rd.</b>
3.4 CITY-ST-ZIP	<b>Eustis, FL 32726</b>
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	<b>D Casey Daniel</b>
4.3 STREET ADDRESS	<b>21835 Lake Seneca Rd</b>
4.4 CITY-ST-ZIP	<b>Eustis, FL 32726</b>
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 do 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 registered 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 **DARREL R. MASSARONI** 7/27/97 852 483-0355

CR2E034 (4/97)