

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K06385
1. Corporation Name
Serafem, Inc



Principal Place of Business

Mailing Address

1804 RIVERVIEW DRIVE
MELBOURNE FL 32901

1804 RIVERVIEW DRIVE
MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

2/11/87

2. Principal Place of Business

2a. Mailing Address

21 1120 E. Palmetto Ave.

26 1120 E Palmetto Ave

4. FEI Number

59-2860469

Applied For
Not Applied For

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

Melbourne, FL

Melbourne, FL

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

32901

Brevard

32901

Brevard

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STIVERS
1804 RIVERVIEW DRIVE
MELBOURNE FL 32901

81 Name

James E. Stivers

82 Street Address (P.O. Box Number is Not Acceptable)

1120 E Palmetto Ave

83

84 Melbourne

FL

85 Zip Code
32901

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 of registered agent or other name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/30/98

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE DELETE
NAME STIVERS, JACIE
STREET ADDRESS 1804 RIVERVIEW DRIVE
CITY - ST - ZIP MELBOURNE FL 32901

1.1 TITLE Change Addition
1.2 NAME Stivers, Jacie
1.3 STREET ADDRESS 1120 E Palmetto Ave
1.4 CITY - ST - ZIP Melbourne, FL 32901

TITLE DELETE
NAME STIVERS, JAMES E
STREET ADDRESS 1804 RIVERVIEW DRIVE
CITY - ST - ZIP MELBOURNE FL 32901

2.1 TITLE Change Addition
2.2 NAME Stivers, James E.
2.3 STREET ADDRESS 1120 E Palmetto Ave
2.4 CITY - ST - ZIP Melbourne, FL 32901

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

3.1 TITLE Change Addition
3.2 NAME VP
3.3 STREET ADDRESS Gary Turner
1120 E Palmetto Ave
3.4 CITY - ST - ZIP Melbourne, FL 32901

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS 300002524945
-05/15/98--01015--036
6.4 CITY - ST - ZIP ***150.00

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:

[Signature]