


APPROVED

FILED

Aug 28 1997 8:00am
Secretary of State

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.)

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # V07221 (7)

1. Corporation Name
LABB INDUSTRIES, INC.



Principal Place of Business 3902 DUNLEER COURT TALLAHASSEE FL 32308	Mailing Address 3902 DUNLEER COURT TALLAHASSEE FL 32308
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DO NOT WRITE IN THIS SPACE

21 2. Principal Place of Business	2a Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24 Country	29 Zip
25 Country	30 Country

3. Date Incorporated or Qualified 01/16/1992	3a. Date of Last Report 03/06/1996
4. FEI Number 59-3107168	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 checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

RUSHING, B. ROGER
3902 DUNLEER COURT
TALLAHASSEE FL 32308

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	400002281664-5
83	-08/29/97--01114--003
84 City	****165.00 FL ****165.00

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	D <input type="checkbox"/> DELETE	1.1 TITLE	PRESIDENT / DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSHING, B. ROGER	1.2 NAME	RUSHING, B. ROGER
STREET ADDRESS	3902 DUNLEER COURT	1.3 STREET ADDRESS	3902 DUNLEER CT.
CITY-ST-ZIP	TALLAHASSEE FL	1.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	VICE PRESIDENT, Secy / DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSHING, TALLIE P.	2.2 NAME	RUSHING, TALLIE P.
STREET ADDRESS	3902 DUNLEER COURT	2.3 STREET ADDRESS	3902 DUNLEER CT. #
CITY-ST-ZIP	TALLAHASSEE FL	2.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSHING, TIMOTHY ROGER	3.2 NAME	RUSHING, TIMOTHY ROGER
STREET ADDRESS	727 GLENDALE AVE	3.3 STREET ADDRESS	3059 ESTEY AVENUE
CITY-ST-ZIP	NAPLES FL	3.4 CITY-ST-ZIP	NAPLES, FL 33942
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THALER, KIRA RUSHING	4.2 NAME	THALER, KIRA RUSHING
STREET ADDRESS	4111 WATERFORD CIRCLE	4.3 STREET ADDRESS	2102 GOLDSMITH LANE
CITY-ST-ZIP	LOUISEVILLE KY	4.4 CITY-ST-ZIP	LOUISVILLE, KY 40218
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RUSHING, ASHLEY	5.2 NAME	RUSHING, ASHLEY
STREET ADDRESS	3902 DUNLEER CT	5.3 STREET ADDRESS	3902 DUNLEER CT.
CITY-ST-ZIP	TALLAHASSEE FL	5.4 CITY-ST-ZIP	TALLAHASSEE, FL 32308
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 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 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 or changed or on an attachment with an address.

**1997
8/28/97**

CR2E034 (4/97)

SIGNATURE _____

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LABB Industries, Inc.

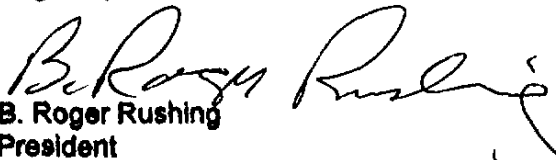
3902 Dunleer Court
Tallahassee, FL 32308
USA

Telephone (904)688-5222

August 21, 1997

Please be aware that the first notice of the corporate filing form was lost in the mail. I spoke with your office this week and was told to file again with this form and pay the original fee of \$165.00. Thank you for your attention to this special situation.

Regards,


B. Roger Rushing
President