FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 210050 (1)EMARK CORPORATION Principal Place of Business Mailing Address 154 S. COMMERCE ST. 154 S. COMMERCE ST. P.O. BOX 755 P.O. BOX 755 DO NOT WRITE IN THIS SPACE SEBRING FL 33871-0755 SEBRING FL 33871-0755 3. Date Incorporated or Qualified 02/24/1958 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1276742 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5, Certificate of Status Desired Fee Required 22 27 City & State City & State 6, Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 25 30 Personal Property Tax due June 30. 24 29 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ERNEST M. BREED 154 S. COMMERCE AVE. Street Address (P.O. Box Number is Not Acceptable) P.O.BOX 353 83 **SEBRING FL 33871-0353** City Zip Code 85 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE ☐ Change ☐ Addition BREED, ERNEST M. NAME 1.2 NAME 154 S. COMMERCE AVE. STREET ADDRESS 1.3 STREET ADDRESS SEBRING FL CITY-ST-ZIP 1.4 CITY - ST-ZIP ☐ DELETE Change ☐ Addition 2.1 TITLE TITLE HESTON, CHARLOTTE B. 2.2 NAME NAME 1103 NE LAKEVIEW DR STREET ADDRESS 2.3 STREET ADDRESS SEBRING FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3.1 TITLE BREED, CHARLOTTE N. NAME 3.2 NAME 509 NE LAKEVIEW DR. STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP SEBRING FL 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE BREED, ERNEST MARK,III NAME 4.2 NAME 509 NE LAKEVIEW DR. STREET ADDRESS 4.3 STREET ADDRESS SEBRING FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE BREED, DAVID S. NAME 5.2 NAME

14. 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

509 NE LAKEVIEW DR

509 NE LAKEVIEW DR

SEBRING FL

SEBRING FL

BREED, JOHN N.

Ernestill Breed 9/24/98

DELETE

Change

Addition