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

**FILED** Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (0)367126 ROY R. BUTLER SCULPTOR, INC. Principal Place of Business Mailing Address 5900 CYPRESS ROAD 5900 CYPRESS ROAD PLANTATION FL 33317 PLANTATION FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/17/1970 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1309259 Not Applicable 21 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Ζıp Zip Country Country This corporation owes or has paid the current year Intangible ☐ Yes □ Ño 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BUTLER, ROY R SCULPTOR, INC. Street Address (P.O. Box Number is Not Acceptable) 5900 CYPRESS ROAD 83 **PLANTATION FL 33317** 84 City Zip Code 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 agont and title if applicable (NOTE Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 1 TITLE BUTLER, ROY R. NAME 1.2 NAME CR2E034 5900 CYPRESS ROAD STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL 33317 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Change Addition 21 TITLE TITLE BUTLER, SANDRA C. 2.2 NAME NAME STREET ADDRESS 5900 CYPRESS ROAD 2.3 STREET ADDRESS PLANTATION FL 33317 2. 4 CITY - ST-ZIP CITY-ST-7IP DELETE Change Addition TITLE 3.1 TITLE NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE 4.1 TITLE Change Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE S 1 TITLE

14. Thereby 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 of the occiver or the occiver or the occiver or the occiver of the

5.2 NAME 5.3 STREET ADORESS

6.1 TITLE 6.2 NAME

DELETE

5.4 CITY-ST-ZIP

6 3 STREET ADDRESS 64 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Addition

Change