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

FILED FLORIDA DEPARTMENT OF STATE Jan 20 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS (9)DOCUMENT # 479558 CHARLES YOKUBONUS AND SON, INC. Mailing Address Principal Place of Business 721 \$ BEACH ST 807 TERRACE AVE DAYTONA BEACH FL 32114 APT 307-A DO NOT WRITE IN THIS SPACE DAYTONA BEACH FL 32114-5403 บร 3. Date Incorporated or Qualified 06/25/1975 2. Principal Place of Business 2a. Mailing Address Applied For 59-1603980 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 28 Trust Fund Contribution 23 8. This corporation owes or has paid the current year Intanglible Personal Property Tax due June 30. 🗓 Yes 🔲 No Country Zip Country Zip Personal Property Tax due June 30. 30 29 24 25 Name and Address of New Registered Agent g. Name and Address of Current Registered Agent 81 YOKUBONUS, CHARLES R 721 S. BEACH APT 307-A 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32114 83 84 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 agent and little if applicable (NOTE, Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition Change DELETE 1.1 TITLE TITLE YOKUBONUS, CHARLES R 1.2 NAME NAME 721 S BEACH APT 307A STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 2.1 TITLE ☐ Change TITLE YOKUBONUS, CHARLES B 2.2 NAME NAME 19 MISNERS BRANCH 2.3 STREET ADDRESS STREET ADDRESS ORMOND BCH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 31 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 4,1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition ☐ DELETE 6.1 TITLE TITLE NAME 6.2 NAME

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.

STREET ADDRESS

6.3 STREET ADDRESS

904-253-0749