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PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G58266

(9)

FILED Jan 27 1998 8:00am Secretary of State

2065, INC. Mailing Address Principal Place of Business 401/420 SE 12 CT 401/420 SE 12 CT FT LAUDERDALE FL 33316 FT LAUDERDALE FL 33316 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/06/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2320183 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. ☐ Yes 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KIDWELL, JACQUELINE H. 1110 S. FLAMINGO RD. Street Address (P.O. Box Number is Not Acceptable) DAVIE FL 33325 83 City 84 85 | Zip Code Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida,
office of registered agent, or both, in the State of Florida. Such change
agent/I am familiar with, and accept the obligations of, Section 607.05 tes, the above-named corporation submits this statement for the purpose of changing its registered thorized by the corporation's board of directors. I hereby accept the appointment as registered SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE Change ___ Addition TITLE 1.1 TITLE KIDWELL, JACQUELINE H. NAME 1.2 NAME 1110 S. FLAMINGO RD. STREET ADDRESS 1.3 STREET ADDRESS DAVIE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE __ Change ___ Addition 2.1 TITLE TITLE KIDWELL, JACQUELINE H 2.2 NAME NAME 1110 S. FLAMINGO RD. 2.3 STREET ADDRESS STREET ADDRESS DAVIE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Additlon Change ☐ DELETE TITLE KIDWELL, JACQUELINE H 3.2 NAME NAME 1110 S. FLAMINGO RD. STREET ADDRESS 3.3 STREET ADDRESS DAVIE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE TITLE RICKEY LYNN HEATH 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP ☐ Change TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP be exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ate and that my signature shall have the same legal effect as if made under oath; that I am an ecular his provided by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this filing does not qualify for indicated on this annual report or supplemental annual report is true and accur officer or director of the corporation or the receiver or trustee explowered to explore the property of the corporation of the receiver or trustee explowered to explore the property of the prope