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

DOCUMENT # H56098

Feb 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS

GARDNER AND ASSOCIATES, INC. Principal Place of Business Mailing Address C/O HARRY VENIS, C.P.A. 100 NE 3RD AVE., STE, 850 FT, LAUDERDALE FL 33301 C/O HARRY VENIS. C.P.A. 100 NE 3RD AVE., STE. 850 FT. LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/09/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2548754 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 VENIS, HARRY 100 NE 3RD AVE. **B2** SUITE 850 FT. LAUDERDALE FL 33301 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 office or registered agent, or both, a trit State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment at agent. I am fairlight sub, and accept the appointment of the purpose of changing of the appointment at agent. I am fairlight sub, and accept the appointment at agent. (NOTE: Registered Agont signature required when reinstating) 12. S AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE GARDNER, STUART NAME 1.2 NAME 2745 E. ATLANTICE 100 NE 3RD AVE. 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 14 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME **3.2 NAME** STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-78P DELETE ■ Addition 6.1 TITLE Change TAILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 co-poration or the receiver or trusted 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 of on an attachment with an address.

FILED