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TITLE

NAME

STREET ADDRESS

FILED PROFIT Apr 23 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #

1. Corporation Name (5)9TH STREET, INC. Principal Place of Business Mailing Address 2536 S.E. 12TH ST. 2536 S.E. 12TH \$T. POMPANO BEACH FL 33062 POMPANO BEACH FL 33062 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/13/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For N. OCEAN BLUD. OCEAN Blud. <u> 750</u> 750 N. 26 59-2438867 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 1101 Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country BROWARD 8. This corporation owes or has paid the current year Intangible 25 BROWAND 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ZIMMER. JEAN G. 2536 S.E. 12TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 POMPANO BCH, FL 33062 150 N. OCEAN Blue 83 1601 AP4- # 84 ₹66 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 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agont and life if applicable OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE **PDST** Change Addition 1.1 TITLE ZIMMER, JEAN G. NAME 1.2 NAME STREET ADDRESS 2536 SE 12 ST 1.3 STREET ADDRESS POMPANO BCH FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST- ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME **STREET ADDRESS** 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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.

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

600002498366 -04/23/98--01090--030

6.1 TITLE

6.2 NAME

DELETE