FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P96000006115 (5) 1014 PEPPER, INC. Principal Place of Business Mailing Address 1900 GLADES HOAD 1800 GLADES ROAD DO NOT WRITE IN THIS SPACE FATON FL 33431 RATON FL 33431 3. Date Incorporated or Qualified 01/19/1996 2. Principal Place of Business 4. FEI Number Applied For SAMPLE SHELL SO LSUST 65-0635294 Not Applicable 551 N.W. 77th STREET 551 N.W. 77th STREET \$8.75 Additional 5. Certificate of Status Desired SUITE 109 Fee Required SUITE 109 BOCA RATON, FL 33487 \$5.00 May Be B. Election Campaign Financing BOCA RATON, FL 33487 Trust Fund Contribution Added to Feep 8. This corporation owes or has paid the current year Intangible No. Personal Property Tax due June 30. ☐ Yes 1291 30 24 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 SUSI, SAMUEL SAMUEL-9U9T; EGQ. 1000-OLADES-FIGAD Stree 82 551 N.W. 77th STREET SUITE 109 BOOK-RATON-F BOCA RATON, FL 33487 City Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named computation 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, lyped or profiled name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO DEFICED AND D'RECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PD DELETE 1.1 TITLE Change ☐ Addition TITLE SAMORE SUGI, ESQ NAME SAMUEL, SUSI 12 NAME 551 N.W. 77th STREET 4900 GLADES RD-015-200 STREET ADDRESS SUITE 109 BOCA HATCHER 1.4 CITY-ST CITY - ST - ZIP BOCA RATON, FL 33487 TITLE DELETE Change Addition 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City - ST- ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY - ST - ZIE DELETE Change Addition TITLE 6.1 TETLE

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.

SIGNATURE:

(71/88 (51) 917 - 2700)

6.4 CITY-ST-ZIP

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS