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

Apr 24 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)A & G PLASTERING, INC. Principal Place of Business Mailing Address 6550 N.W. 84TH AVENUE 8550 N.W. B4TH AVENUE PARKLAND FL 33087 PARKLAND FL 33067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/05/1975 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-1602815 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 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes ☐ No 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FERNANDES, LEONORA S. 3481 NW 47TH AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **COCONUT CREEK FL 33063** 83 84 City 85 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 title if applicable OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE TATLE STD ☐ Change ☐ Addition Guinn, agnes c NAME 1.2 NAME 6550 NW 84TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS PARKLAND, FL 00000 CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition 21 TOLE TITLE GUINN, RICHARD T NAME 22 NAME 6550 NW 84TH AVENUE STREET ADDRESS 2.3 STREET ADDRESS PARKLAND, FL 00000 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4 CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS

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 frustee 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:

64 CiTY-ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME 6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

STREET ADDRESS

CHTY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE NAME

48/28

Change

Change

☐ Addition

Addition

FILED