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FILED
Jun 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P97000074476 (7)**

1. Corporation Name
EDLOR CORP

Principal Place of Business	Mailing Address
C/O GNC 1550 W 84 ST #20 HIALEAH FL 33014	C/O GNC 1550 W 84 ST #20 HIALEAH FL 33014

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 8625 NW 186 St
22 Suite, Apt. #, etc
23 City & State: Miami Fl.
24 Zip: 33015 25 Country

2a. Mailing Address
26 8625 NW 186 St
27 Suite, Apt. #, etc
28 City & State: Miami Fl.
29 Zip: 33015 30 Country

3. Date Incorporated or Qualified
08/26/1997

4. FEI Number
65-0777567 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
SIRVEN & ADAMS, P.A.
380 W. 49 STREET
HIALEAH FL 33012

10. Name and Address of New Registered Agent
81 Name: Edgar Espinosa
82 Street Address (P.O. Box Number is Not Acceptable): 8625 NW 186 St
83
84 City: Miami FL 85 Zip Code: 33015

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: President. Edgar Espinosa (Note: Registered Agent signature required when reinstating) DATE: 4-22-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☒ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	ESPINOSA, JOSE EDGAR	1.2 NAME	P
STREET ADDRESS	1550 W. 84 STREET, #20	1.3 STREET ADDRESS	Edgar Espinosa
CITY-ST-ZIP	HIALEAH FL 33014	1.4 CITY-ST-ZIP	8625 NW 186 St Miami Fl. 33015
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
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-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	500002555410
STREET ADDRESS		6.3 STREET ADDRESS	-06/10/98--01015--018
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

CR2E034 (10/97)

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 added to the report with an address.

SIGNATURE: Edgar Espinosa DATE: 4-22-98 Phone Number: 820-1856