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

PROFIT

SIGNATURE:

Mar 10 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 128129 (4)THE TRAVIS CO. Principal Place of Business Mailing Address 2600 S W 27TH AVE 2600 S W 27TH AVE MIAMI FL 33133 MIAMI FL 33133 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/30/1933 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 26-7074227 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name TAYLOR, MARLENE T. 2600 S W 27TH AVE Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33133** 83 84 City Zip Code 65 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, typod or profed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE SD TITLE TAYLOR, MARLENE T Marlene 12 NAME NAME CRZE034 2600 S.W. 27 Ava. 2600 S W 27TH AVE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33133** Miami # 33133 CITY-ST-ZIP 1.4 CiTY-ST-ZiP DELETE Change Addition 2.1 TITLE TITLE TATHAM, THOMAS L 2.2 NAME NAME 2800 S W 27TH AVE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2. 4 CITY - ST-ZIP CITY-ST-ZIP Change DELETE Addition 3.1 TITLE TITLE TATHAM, BERNICE 3.2 NAME NAME Bernice Tatham 2600 S W 27TH AVE 33 STREET ADDRESS STREET ADDRESS 27 Ave. 2600 S.W. MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Addition Channe TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP City-St-719 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.

ELORIDA DEPARTMENT OF STATE

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