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

FILED Jan 26 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 # 158069 (5)LINDA COURT, INCORPORATED Principal Place of Business Mailing Address 5944 S.W. 73RD STREET 5944 S.W. 73RD STREET SOUTH MIAMI FL 33143 SOUTH MIAM! FL 33143 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/17/1949 2. Principal Place of Business 2a. Mailing Address 4. FE! Number Applied For 59-0838682 26 Not Applicable | 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BROWN, FREDERICK K. J 5944 SW 73RD ST 82 Street Address (P.O. Box Number is Not Acceptable) **SOUTH MIAMI FL 33143 вз** 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 (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable DATE (10/97) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change Addition BROWN, FREDERICK K., JR. NAME 1.2 NAME CR2E034 5944 SW 73RD STREET STREET ADDRESS 1.3 STREET ADDRESS SOUTH MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE **BROWN,LYNN** 2.2 NAME NAME **5944 SW 73RD STREET** STREET ADDRESS 2.3 STREET ADDRESS SOUTH MIAMI FL CITY-ST-ZIP 2.4 CITY~ST-ZIP DELETE Change Addition TITLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 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 DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

SIGNATURE

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)(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 open attackment with an address. PRODUCICIC K. BROWN DR. - PRESIDENT

1/14/98

305-665-9711