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Mar 27 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 162292 (7)
1. Corporation Name
TRAEGER BROS. AND ASSOCIATES, INC.



Principal Place of Business
1330 NE 1ST COURT
MIAMI FL 33132

Mailing Address
1330 NE 1ST COURT
MIAMI FL 33132-1506

3. Date Incorporated or Qualified
07/15/1950

3a. Date of Last Report
03/06/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-0642249

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

24

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29

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TRAEGER, BERT
8840 SW 85TH ST.
MIAMI FL 33173

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 required for each of the registered agent and director, applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME TRAEGER, BERT
STREET ADDRESS 8840 SW 85TH STREET
CITY-ST-ZIP MIAMI, FL 0

1.1 TITLE PDS ☒ Change ☐ Addition
1.2 NAME Traeger, Bert
1.3 STREET ADDRESS 8840 SW 85 Street
1.4 CITY-ST-ZIP Miami, FL

TITLE ~~STD~~ ☒ DELETE
NAME ~~TRAEGER, ROSEBUD~~
STREET ADDRESS 10739 SW 113TH PLACE
CITY-ST-ZIP MIAMI, FL 0

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE VTSD ☐ DELETE
NAME HOWARD, TRAEGER
STREET ADDRESS 14400 SW 81 AVENUE
CITY-ST-ZIP MIAMI FL

3.1 TITLE VTD ☒ Change ☐ Addition
3.2 NAME Traeger, Howard
3.3 STREET ADDRESS 14400 SW 81 Ave
3.4 CITY-ST-ZIP Miami, FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/97 305-371-5551
Date Daytime Phone #

CR2E034 (9/96)