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

FILED Feb 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Socretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # 325381 DEG, INC. Principal Place of Business Mailing Address 453E IRVINGTON AVE 4536 IRVINGTON AVE JACKSONVILLE FL 32210 JACKSONVILLE FL 32210 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/17/1968 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 59-1204085 Not Applicable Suite Apt # etc Suite Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes ☐ No 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEDGE, JOE W. JR. 4536 IRVINGTON AVE. 82 Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 84 City Zip Code 1. Pursuant to the provisions of Sections 607 (602 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of hanging its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or product more of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELFTE 1.1 TITLE Change Addition TITLE DEDGE, ARTHUR L 1.2 NAME MALAF **616 HAMILTON ST** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE DEDGE, JOE W. JR 22 NAME NAME **4536 IRVINGTON AVE** STREET ADDRESS 23 STREET ADDRESS JACKSONVILLE FL 2 4 CiTY-ST-ZIP CITY-ST-ZIP DELETE ___ Addition TITLE 31 TITLE RIVENBARK, JIMMIE RAY NAME 3.2 NAME 4536 IRVINGTON AVE STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE MAHLA, PAUL A 4 2 NAME NAME 2025 HAMILTON ST STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Addition TITLE 5.1 TITLE NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

I horeby 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.

6 1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 City-St-ZiP

☐ Change

Addition

DELETE

TITLE

NAME

STREET ADDRESS

SIGNATURE: JOB W. DEDGE JR