

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

FILED

Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra S. Northam Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 335824 (9) 1. Corporation Name BOB TOSKI, INC.					
Principal Place of Business 20914 HAMACA COURT/ PASEOS BOCA RATON FL 33433			Mailing Address 20914 HAMACA COURT/ PASEOS BOCA RATON FL 33433		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 24 Suite, Apt. #, etc. 25 City & State 26 Zip Country		3. Date Incorporated or Qualified 10/01/1988 4. FEI Number 58-1224319 5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 7. This corporation owes or has paid 1% current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No	
8. Name and Address of Current Registered Agent TOSKI, JACQUELINE 20914 HAMACA COURT-PASEOS BOCA RATON FL 33433			9. Name and Address of New Registered Agent 91 Name 92 Street Address (P.O. Box Number is Not Acceptable) 93 94 City FL 95 Zip Code		
11. Pursuant to the provisions of Sections 607.0602 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 607.0608, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.1 TITLE ☐ DELETE NAME PD STREET ADDRESS TOSKI, ROBERT J CITY - ST - ZIP 20914 HAMACA COURT, BOCA RATON FL			13.1 TITLE ☐ Change ☐ Addition 13.2 NAME 13.3 STREET ADDRESS 13.4 CITY - ST - ZIP		
12.2 TITLE ☐ DELETE NAME ST STREET ADDRESS TOSKI, JACQUELINE S CITY - ST - ZIP 20914 HAMACA COURT BOCA RATON FL			13.5 TITLE ☐ Change ☐ Addition 13.6 NAME 13.7 STREET ADDRESS 13.8 CITY - ST - ZIP		
12.3 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			13.9 TITLE ☐ Change ☐ Addition 13.10 NAME 13.11 STREET ADDRESS 13.12 CITY - ST - ZIP		
12.4 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			13.13 TITLE ☐ Change ☐ Addition 13.14 NAME 13.15 STREET ADDRESS 13.16 CITY - ST - ZIP		
12.5 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			13.17 TITLE ☐ Change ☐ Addition 13.18 NAME 13.19 STREET ADDRESS 13.20 CITY - ST - ZIP		
12.6 TITLE ☐ DELETE NAME STREET ADDRESS CITY - ST - ZIP			13.21 TITLE ☐ Change ☐ Addition 13.22 NAME 13.23 STREET ADDRESS 13.24 CITY - ST - ZIP		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(X), 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: *Robert J. Toski*
 Robert J. Toski, President

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Daytime Phone # 0336 168