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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 15 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 343419 (8) ED TARVER, INC. Principal Place of Business Mailing Address 1121 SO FLORIDA AVE. 1121 SO FLORIDA AVE. P.O. BOX 2275 P.O. BOX 2275 DO NOT WRITE IN THIS SPACE LAKELAND FL 33806-8307 LAKELAND FL 33806-8307 3. Date Incorporated or Qualified 03/21/1969 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1480917 Not Applicable 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 23 28 Trust Fund Contribution Added to Fees Zìp Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30, ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TARVER III, EDWARD J 2620 BERKELEY ST Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33803 83 84 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 famillar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change ___ Addition TITLE TARVER JR,EDWARD J NAME 1.2 NAME **CR2E034** 1121 S FLORIDA AVE. STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL CITY - ST - ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change ☐ Addition TARVER, GLORIA D NAME 2.2 NAME 1121 S FLORIDA AVE. STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY - ST - ZiP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE TARVER III, EDWARD J NAME 3.2 NAME 1121 S FLORIDA AVE. 3.3 STREET ADDRESS STREET ADDRESS LAKELAND FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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.

HELWANT I TARVER

CITY-ST-ZIP

SIGNATURE: