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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Jan 26 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)375876 BOND STREET PROPERTIES, INC. Mailing Address Principal Place of Business 850 WEST VENTURA AVE. 850 WEST VENTURA AVE. PO BOX 1029 PO BOX 1029 DO NOT WRITE IN THIS SPACE CLEWISTON FL 33440 CLEWISTON FL 33440 3. Date Incorporated or Qualified 12/21/1970 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For BOXZZB Not Applicable R12 B0+228 1212 59-1309798 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be Cleurs! Added to Fees Trust Fund Contribution Cle. Country Country 8. This corporation owes or has paid the current year Intangible USA 33 £40 25 U>A ☐ Yes 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent TULLOS, R. CLARK 850 WEST VENTURA AVE. Street Address (P.O. Box Number is Not Acceptable) **CLEWISTON FL 33440** 83 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 DELETE Change ___ Addition TITLE 1.1 TITLE TULLOS, RAYMOND C 1.2 NAME NAME 850 W. VENTURA AVE. 1.3 STREET ADDRESS STREET ADDRESS CLEWISTON FL 1.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change ___ DELETE 2.1 TITLE TITLE BENAVIDES, ARMANDO L. 2.2 NAME NAME 850 W. VENTURA AVE. 2.3 STREET ADDRESS STREET ADDRESS CLEWISTON FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE TULLOS, LEOTA M 3.2 NAME NAME 850 W VENVURA AVE 3.3 STREET ADDRESS STREET ADDRESS CLEWISTON FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP ___ Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

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 on an attachment with an address. UR CERLUPTEDIOS CIGNATI IRE.

STREET ADDRESS CITY-ST-ZIP

*/13/98