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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 412182

(8)

PRENTICE INTERNATIONAL, INC.

FILED
Apr 29 1998 8:00am
Secretary of State

| 0 | | | 1 0 0 0 0 0 0 0 0 0 | |
|--|-------------------------------|---------------------------------------|---|---|
| Principal Place of Business | Mailing Address | | | • |
| 5371 ASCOT BEND BOCA RATON FL 33496 US 5371 ASCOT BEND BOCA RATON FL 33496 US | | | | |
| | | | DO NOT WRITE IN THIS SPACE | |
| | 00 | | 3. Date Incorporated or Qualified | OFFICE |
| | | | 11/06/1972 | • |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | 26 | | 59-1493613 | Not Applicable |
| Suite, Apt. #, etc. | Suite, Apt. #, etc | · · · · · · · · · · · · · · · · · · · | | \$8.75 Additional |
| 22 27 | | • | 5. Certificate of Status Desired | Fee Required |
| City & State | City & State | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | 28 | | Trust Fund Contribution | Added to Fees |
| Zip Country | Zip | Country | 8. This corporation owes or has paid the cu | irrent year Intangible |
| 24 25 | 29 | 30 | Personal Property Tax due June 30. | Yes No |
| 9, Name and Address of Current Registered Agent | | 81 Name | 10. Name and Address of New Registered | Agent |
| PRENTICE, HERBERT | | 81 Name | | |
| 5371 ASCOT BEND | | 82 Street Ad | Idress (P.O. Box Number is Not Acceptable) | |
| BOCA RATON FL 33496 | | | | |
| | | 83 | | |
| ** | | 84 City | E | 85 Zip Code |
| 11. Pursuant to the provision of Sections 607 0502 | and 607,1508. Florida Statute | es, the above-named co | propration submits this statement for the nurpose | of changing its registered |
| office or registered agent, or both, in the Statore | of Florida, Such change was a | uthorized by the corpor | ration's board of directors. I hereby accept the ap | pointment as registered |
| | 77 (1/1/2) | moa otatoles. | / / / / / / / / / / / / / / / / / / / | フラリカ人 |
| SIGNATURE Signature byfed or instead name of signature agent | and title if applicable (NOT | Registered Agent signature red | gured when reinstating) DATE | 100/03 |
| 12. OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTORS IN 12 |
| TITLE PO | ☐ DELETE | 1.1 TITLE | | ☐ Change ☐ Addition |
| NAME PRENTICE, HERBERT | | 1.2 NAME | | |
| STREET ADDRESS 5371 ASCOT BEND | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP BOCA RATON FL | · | 1.4 CITY+ST-ZIP | | |
| TITLE | ☐ DELETE | 2 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | 2.2 NAME | | |
| STREET ADDRESS | | 2 3 STREET ADDRESS | | |
| CITY - ST - ZIP | | 2 4 CITY-ST-ZIP | | |
| TITLE | DELETE | 3 1 TITLE | | ☐ Change ☐ Addition |
| NAME | | 3.2 NAME | | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | | |
| CITY-\$T-ZIP | | 3.4. CITY-ST-ZIP | | |
| TITLE | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | 4. 2 NAME | | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 4.4 CITY - ST - ZIP | | |
| md | ☐ DELETE | 5.1 TITLE | | Change Addition |
| NAME. | | 5.2 NAME | | |
| STRE U ADDRESS | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 5.4 CITY - ST- ZIP | | |
| TITLE | ☐ DELETE | 6.1 TITLE | | Change Addition |
| NAME | | 6.2 NAME | | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | | |

receby 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 arrival 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.

CIONIATUDE.

14-20-98

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