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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1998 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 489736

(9)

HAGER WORLDWIDE, INC. Mailing Address Principal Place of Business 12890 AUTOMOBILE BLVD. #A 12890 AUTOMOBILE BLVD. #A CLEARWATER FL 34622 CLEARWATER FL 34622 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/18/1975 2. Principal Place of Business 2a. Mailing Address 4 FELNumber Applied For 59-1709250 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional П 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 Country 8. This corporation owes or has paid the current year Intangible 🗶 Yes 24 25 Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name SCHNEIDER, NANCY G. 12890 AUTOMOBILE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A 83 CLEARWATER FL 34622 11. Pursuant to the provisions of Sections 607.0302 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. Florida Statutes. ider - While SIGNATURE

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DITETE Change Addition TITLE 1.1 TITLE HAGER, MICHAEL NAME 1.2 NAME 12890 AUTOMOBILE BLVD #A STREET ADDRESS 1.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 1.4 CITY - \$1 - ZIP DELETE Change ___ Addition TITLE VTS 2.1 TITLE **SCHNEIDER, MARK W.** NAME 2.2 NAME 12890 AUTOMOBILE BLVD SUITE A STREET ADDRESS 2.3 STREET ADDRESS **CLEARWATER FL** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Addition TITLE 🔲 Change 3.1 11114 NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CHTY-ST-ZIP DELETE Change Addition TITLE 4.1 THE NAME 4 2 NAML STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 1ITLE

14. Thereby certify that the information sufficient 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 animal report or displacemental amount 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 exposition of the excessor trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or block 13 brianged, of on an attainment with an address

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-\$1 - ZIP