**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** May 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)EDNA HIBEL CORP. Principal Place of Business Mailing Address 1530 WEST 53 ST. P. O. BOX 9967 MANGONIA PARK FL RIVIERA BCH. FL 33419 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/12/1975 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 22-1754128 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 30 Yes 25 Personal Property Tax due June 30. g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name PLOTKIN, THEODORE 1530 WEST 53RD STREET 82 Street Address (P.O. Box Number is Not Acceptable) MANGONIA PARK, FL 33407 83 City Zip Code 85 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** Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition PLOTKIN, THEODORE NAME 1.2 NAME 2923 LAKE DR. STREET ADDRESS 1.3 STREET ADDRESS RIVIERA BEACH FL CITY-ST-ZIP 1.4 CITY-\$1-2IP DELETE Change TITLE Addition 21 TITLE PLOTKIN, EDNA NAME 22 NAME 2923 LAKE DR. STREET ADDRESS 23 STREET ADDRESS RIVIERA BEACH FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE Change .... Addition 3.1 TITLE PLOTKIN, ANDREW NAME 32 NAME **428 EBBTIDE DRIVE** STREET ADDRESS 3.3 STREET ADDRESS N.PALM BCH. FL CITY-ST-ZIP 3 4. CITY-ST-ZIP Addition DELETE 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE ☐ Addition NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP

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 Plots 13 of Plots 14 of Plots 15 of Plots 1

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - 7tP

CIGNATURE.

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

ANDREW PLOTKIN 4/2/10 561-848. 9633

Change

Addition