FILED FILE NOW: FILING FEE AFTER MAY 18T IS \$550.00 **PROFIT** Apr 09 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 565169 33RD AVE, INVESTMENTS, INC. Mailing Address Principal Place of Business 2500 HOLLYWOOD BLVD. SUITE 212 2500 HOLLYWOOD BLVD. SUITE 212 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1978 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0119150 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. П 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Ζφ Country Zip Country 24 30 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MANELLA, ROSS ESQ. 2500 HOLLYWOOD BOULEVARD Street Address (P.O. Box Number is Not Acceptable) **SUITE 212** HOLLYWOOD FL 33020 84 City 11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08, 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 607.05:05, Florida Statutes. **SIGNATURE** 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 12. 13. DELETE Change PSTD 11 TITLE BRISSON, JEAN CLAUDE 12 NAME NAME 1080 ST MATHIEU, APT 203 1.3 STREET ADDRESS STREET ADDRESS MONTREAL PO CANADA H3H 2S8 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change 2.1 TITLE TITLE DESCHAMPS, MARCELLE 22 NAME NAME 1080 ST MATHIEU, APT 203 2.3 STREET ADDRESS STREET ADDRESS MONTREAL PO CANADA H3H 2S8 2.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 31 TITLE TITI F BRISSON, CATHERINE 3.2 NAME NAME 1080 ST MATHIEU, APT 203 3.3 STREET ADDRESS STREET ADDRESS MONTREAL QU CITY-ST-ZIP 3.4. CITY-ST-ZIP Change ■ DELETE 4.1 TITLE TITLE BRISSON, GREGOIRE 4.2 NAME NAME 1080 ST MATHIEU, APT 203 4.3 STREET ADDRESS STREET ADDRESS MONTREAL QU 4.4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE TITLE 5.1 TITLE 5.2 NAME NAME

Lugger

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

Applied For

Zip Code

___ Addition

Addition

Addition

Addition

Addition

Addition

☐ Change

Not Applicable

14. 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.

6.1 TITLE 6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

5.4 CITY-ST-ZIP

DELETE