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PROFIT CORPORATION ANNUAL REPORT 1998



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 618209

AOW, INC. Principal Place of Business Mailing Address 2980 W OAKLAND PARK BLVD 2990 W OAKLAND PARK BLVD FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/10/1979 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1900408 21 26 Not Applicable Suite, Apt #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FUSSELL, GEORGE 3108 N.E. 25 STREET Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33308 83 84 City 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. Stpouture, typed or printed narro of registeric-Lagorit and this it applicable (NOTE Bugistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE FUSSELL, GEORGE NAME 1.2 NAME 3108 NE 25 ST. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELFTE Change Addition 21 TITLE TITLE **FUSSELL. GEORGE** NAME 2.2 NAME 3108 NE 25 ST. STREET ADDRESS 2.3 STREET ADDRESS ft. Lauderdale fl CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-St-ZiP 34. CITY-ST-ZIP DELETE 4.1 TITLE Change ☐ Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP Change DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME STREET ADORESS 63 STREET ADDRESS 64 CITY-ST-ZIP

his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information innual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an ever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in himent with an address. 14. Thereby cortify that the information suindicated on this annual report or suindicated on this annual report or suindicated or director of the corporation. Block 12 or Block 13 if changed, or

SIGNATURE:

954-486-APJP

FILED

Mar 16 1998 8:00am

Secretary of State