Apr 30 1998 8:00am Secretary of State

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

FILED **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #1 622598 (1)JAMES E. BOGGESS, INC. Principal Place of Business Mailing Address 10800 Biscayne Boulevard 9944 Collins Avenue Suite 900 DO NOT WRITE IN THIS SPACE Miami, FL 33161 Bal Harbour, FL 33154 Date Incorporated or Qualified 05/22/1979 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-1912782 21 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campa gn Financing Trust Fund Contribution 23 Added to Fees Country Zφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BOGGESS, JAMES E. Street Address (P.O. Box Number is Not Acceptable) 82 9944 COLLINS AVENUE, #3 BAL HARBOUR, FL 33154 83 84 City 85 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. Thereby accept the appointment as registered agent. I am lamihar with, and accept the obligations of, Section 607,0505, Florida Statutes. JAMES E. BOGGESS April 27, 1998 (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE **PSTD** 1 1 TITLE Change Addition BOGGESS; JAMES E: 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS 9944 COLLINS AVE., #3 CiTY - ST- ZIP BAL HARBOUR, FL 33154 1.4 CITY+ST-ZIP XX DELETE Change ☐ Addition TITLE 2 1 1ITLE 2.2 NAME BOGGESS, BETTY W. (Deceased) STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CHY-ST-ZIP DELETE 3 1 TITLE Addition NAME 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CHY-ST-ZIP DELETE 4 1 TITLE ☐ Change ☐ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 JOHE 5.2 NAME STREET ADDRESS 5.3 STREET AUDRESS CITY-ST-ZIP 5.4 CITY ST-7/P DELETE TITLE 6.1 TITLE Addition 700002508

64 CHY-ST ZIP 14. Thereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I furthe shifty 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 offect as if made under eath; 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 clanged, or on an attachment with any address.

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

STREET ADDRESS

JAMES E. BOGGESS

April 27, 1998 (305) 899-2100

-05/01/98--010

***150.00