FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jan 15 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 637672 (7) THE SIDNEY COMPANY Principal Place of Business Mailing Address 13930 NW 60TH AVENUE 13930 NW 60TH AVENUE MIAMI LAKES FL 33014 MIAMI LAKES FL 33014 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/27/1979 2. Principal Place of Business 2a. Mailing Address FEI Number 21 26 59-1946221 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П Trust Fund Contribution Added to Fees Ζiρ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KLEIN, MYLES 287T N.E. 191 ST. STE. 703 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33180 83 84 Zip Code F 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. TITLE PD DELETE 1.1 TITLE Change LEVY, SIDNEY NAME 1.2 NAME 577 OCEAN BLVD. STREET ADDRESS 1.3 STREET ADDRESS GOLDEN BEACH FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change TITLE 2.1 TITLE LEVY, SCOTT NAME 2.2 NAME 13930 NW 60 AVENUE STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 2. 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change DELETE TITLE 5.1 TITLE

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 of 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.

5.2 NAME

6.1 TOTLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS CITY-SY-ZIP

STREET ADDRESS.

305 557 4782

Change

Applied For

Not Applicable

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