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

**FILED** Apr 21 1998 8:00am . PROFIT LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Socretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # ROBERT K. TOUHY, CPA, P.A. Principal Place of Business Mailing Address 403 S.W. 8TH STREET 403 S.W. 8TH STREET FORT LAUDERDALE FL 33315 FORT LAUDERDALE FL 33315 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/14/1980 2. Principal Place of Business 4. FEt Number 2a. Mailing Address Applied For 59-1989687 Not Applicable 26 Suite, Apt #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Flection Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Country This corporation owes or has paid the current year Inlangible Yes Yes 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name TOUHY, ROBERT K 403 S.W. 8TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33315 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. SIGNATURE Signature, typed or printed name of registered agent and lifte if applicable (NOTE Registered Ager Largnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELFTE Change Addition TITLE 1.1 THUE TOUHY, ROBERT K. 1.2 NAME NAME 1410 N.E. 42 CT. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY - ST - ZIP 1.4 CHY-ST-7P DETETE Change ☐ Addition TITLE 2.1 Hittl NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CH1Y - ST- ZIP CITY-ST-ZIP DITE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 33 STREET ADDRESS CITY-ST-ZiP 34, CHY-ST-7IP DELETE Change Addition TITLE 41 THLE 1778

CITY-ST-ZIP 14. Thereby 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 suppliemental 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

4. 2 NAME

51 TITLE

5.2 NAME

6.1 1ITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - \$1 - ZIP

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

DELETE

ROBERT IL. TOUHY ,, 198 MV-WY.

Change

Change

Addition

Addition