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PROFIT CORPORATION ANNUAL REPORT

1998

J'SODACOR, INC.



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVÍSION OF CORPORATIONS

DOCUMENT #

FILED Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1436 N 4TH ST 1436 N 4TH ST HIGHLANDS N 28741 HIGHLANDS N 28741 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/15/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2109331 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CAGLE, PETER B. 6075 SUNSET DR STE 203 **B2** Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33143** 83 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. 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 1.1 TITLE HERNANDEZ, JUANITA NAME 1.2 NAME 1436 N 4TH ST STREET ADORESS 1.3 STREET ADDRESS HIGHLANDS N<. CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 2.1 TITLE HERNANDEZ, STEVEN A NAME 2.2 NAME 511 MONTGOMERY ST STREET ADDRESS 2.3 STREET ADDRESS DECORAHIA SAIDI CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition HERNANDEZ, JEFFREY M NAME 3.2 NAME 2093 SADDLE RIDGE LANE STREET ADDRESS 3.3 STREET ADDRESS MARIETTA GA 30062 CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change ■ Addition BARRETO, RENA M. NAME 4. 2 NAME 1300 GOLF COURSE ROAD STREET ADDRESS 4.3 STREET ADDRESS **EVELETH MN 55734** 4.4 CITY-ST-ZIP CITY - ST - ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE ☐ Change ☐ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

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 or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if garaged, or on an attachment with an address

SIGNATURE: