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

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May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** 679455 (6)STEVEN A. BOOTES INC. Principal Place of Business Mailing Address 1091 NE 45TH ST 1091 NE 45TH ST FT LAUDERDALE FL 33334 FT LAUDERDALE FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/23/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2014973 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. ☐ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **BOOTES, STEVE** 1091 NE 45TH ST. Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33334 Zip Code 11. Pursuant to the provi the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familia authorized by the corporation's board of directors. I hereby accept the appointment as registered SIGNATURE stered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition Change TITLE 11 TITLE **BOOTES, STEVEN A** MAGE 12 NAME 1091 NE 45TH ST 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change 2.1 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 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 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP eyomption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and that my standard shall have the same legal effect as if made under oath; that I am an ite this report as required by Chapter 607, Florida Statutes; and that my pame appears in 14. I hereby certify that the information supplied with indicated on this annual report or supplementate officer or director of the corporation or the red Block 12 or Block 13 if changed, or op an attach

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