SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

Aug 17 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION! Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** 90876 **DOCUMENT #** Homestead Rosfing Principal Place of Business Mailing Address 6645 30th St. So Bresidence DO NOT WRITE IN THIS SPACE St. Petershurg, Fl. 3. Date Incorporated or Qualified 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 26 <u>59-2111407</u> Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Ø 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Rick Gechter Lrwin Delete 11411-77 Ave N 9-30-98 Seminole Fla 33772 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. Fam familiar with, and accept the obligations of Section 607.0505, Florida Statutes. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (2/98)TITLE President Addition 117000 Change Robert Irwin Rick Gechtur 12 NAME 6445 30th St. So. STREET ADDRESS 1.3 STREET ADDRESS 11411-77 AUL N CITY - ST - ZiP 14 CITY - ST - ZIP TITLE Change 2.1 TITLE ... Addition Donna Gechter NAME 2.2 NAME 11411-77AL N STREET ADDRESS 2.3 STREET ADORESS CITY-ST-2IP 2. 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition Robert Irwin NAME 3 2 NAME 6645 30H St. So STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP TITLE 4.1 TIFLE Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-\$1-7IP 4.4 CITY-ST-ZIP □ DELETE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP □ DELETE Change HELE 6 1 TITLE Addition NAM! 62 NAME -08/17/98--01137--006 STREET ADDRESS 63 STREET ADDRESS ***70.25 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 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Achiet K. Icain 17/98 (813)864-3282