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

STREET ADDRESS

SIGNATURE KEY!

CITY-ST-ZIP

FILED Apr 03 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)F27595 POOH-BREEZ, INC. Principal Place of Business Mailing Address 158 NORTH RIVER DR. EAST 158 NORTH RIVER DR. EAST JUPITER FL 33458 JUPITER FL 33458 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/31/1981 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2116875 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution Added to Fees 28 Ziρ Country Zıp Country This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name DENNIS, KEVIN 158 NORTH RIVER DR. EAST 82 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33458 83 84 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, typud or printed name of registried agent and title if applicable (NOTE: Registered Agent algorature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 11 TITLE Change Addition DENNIS, KEVIN 1.2 NAME NAME 158 NORTH RIVER DR. EAST STREET ADDRESS 1.3 STREET ADDRESS Jupiter Fl CITY-S1-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 31 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 ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 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 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 apport 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.