SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

FILED AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 09 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # F30042 (8)SUZERAIN CORPORATION Principal Place of Business Mailing Address C/O GERTRUDE REICHGOTT C/O GERTRUDE REICHGOTT 4044 NW 19 ST 0311 4044 NW 19 ST G311 LAUDERHILL FL 33313 LAUDERHILL FL 33313 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 05/08/1981 <u>06/17/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 7W195+ 4044 21 59-2089959 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State 6. Election Campaign Financing \$5.00 May Ele LAWER HILL 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 333/3 BROWARD □ No 24 Personal Property Tax due June 30. X Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REICHGOTT, GERTRUDE Name 4044 NW 19 ST. G311 Street Address (P.O. Box Number is Not Acceptable) **B2** LAUDERHILL FL 33313 83 84 City 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 3rd accept the obligations of, Section 60, 0505, Florida Statutes.

SIGNATURE u de **SIGNATURE** gistered Agent signature required when reinstating) Signature Ayped or printed name of registered agent and title if app 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE Addition 1.1 TITLE TITLE TELLONE, JOSEPH D NAME 1.2 NAME 4044 NW 19TH ST. G 311 STREET ADDRESS 1.3 STREET ADDRESS LAUDERHILL FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change AMES, BARBARA NAME 2.2 NAME 4044 NW 19TH ST. G 311 STREET ADDRESS 2.3 STREET ADDRESS LAUDERHILL FL 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 Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Adoition TITLE 5.1 TITLE NAME 5.2 NAME

14. I do 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 tho 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 an autonoment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CHTY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

☐ DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE NAME

Change

☐ Addition