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

May 04 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F51545 (4) SCOTT SINGER INSTALLATIONS, INC. Principal Place of Business Mailing Address C/O SCOTT SINGER C/O SCOTT SINGER 822 S. LAKE SIDE DR. 822 S. LAKE SIDE DR. DO NOT WRITE IN THIS SPACE LAKE WORTH FL 33460 LAKE WORTH FL 33460 3. Date Incorporated or Qualified 10/28/1981 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 59-2130323 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SINGER, SCOTT 822 S. LAKE SIDE DR. Street Address (P.O. Box Number is Not Acceptable) LAKE WORTH FL 33460 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, and accept the obligations of, Section 607.0505, Florida Statutes. -23-98 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition 1.1 TITLE TITLE SINGER, SCOTT 1.2 NAME NAME 822 S. LAKE SIDE DR. STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL 33460 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY ST ZIP 2. 4 City-St-ZiP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TOLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE Change Addition TITLE NAME 6 2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 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 attachment with an address.

124 143 14 13

SIGNATURE:

FILED

4-23-98 561-533-7521