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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000001306 (8)

FRANK AND GLADYS, INC.

Principal Place of Business Mailing Address 5853 NW 40 AVE 1953 N. UNIVERSITY DRIVE COCONUT CREEK FL 33073 DO NOT WRITE IN THIS SPACE **CORAL SPRINGS FL 33071** 3. Date Incorporated or Qualified 03/20/1995 2. Principal Place of Business Mailing Address Applied For 21 65-0555064 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 X Yes 29 Personal Property Tax due June 30. 30 ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CATTERSON, JAMES F 5853 NW 40 AVE 62 Street Address (P.O. Box Number is Not Acceptable) **COCONUT CREEK FL 33073** 63 84 City 65 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change ■ Addition CATTERSON, GLADYS NAME 1.2 NAME 5853 NW 40TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS **COCONUT CREEK FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE Change Addition **CATTERSON, JAMES** NAME 2.2 NAME 5853 NW 40TH AVENUE STREET ADDRESS 23 STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIP 2 4 CHY-ST-ZIP DELETE TITLE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE Change 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE 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 STREET ADDRESS 6.3 STREET ADDRESS

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 suppliemental 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.

6.4 CITY-S1-ZIP

SIGNATURE:

(954) 255-1001

FILED

Mar 12 1998 8:00am

Secretary of State