


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

FILED
Feb 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000001910 (7)**

1. Corporation Name

PERRY MARKETING CORPORATION

Principal Place of Business

Mailing Address

**100 WOLTZ AVE.
MT AIRY NC 27030**

**100 WOLTZ AVE.
MT AIRY NC 27030**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1995

4. FEI Number

56-1333394

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLTZ JR, WILLIAM K	1.2 NAME	
STREET ADDRESS	100 WOLTZ AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MT AIRY NC 27030	1.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOLTZ, WILLIAM	2.2 NAME	
STREET ADDRESS	100 WOLTZ STREET	2.3 STREET ADDRESS	
CITY-ST-ZIP	MOUNT AIRY NC	2.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DRAUGHN, DEAN	3.2 NAME	
STREET ADDRESS	100 WOLTZ STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	MOUNT AIRY NC	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FENNEBRESQUE, JOHN C.	4.2 NAME	
STREET ADDRESS	100 WOLTZ STREET	4.3 STREET ADDRESS	
CITY-ST-ZIP	MOUNT AIRY NC	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KEELS, WILLIAM A.	5.2 NAME	
STREET ADDRESS	100 WOLTZ STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	MOUNT AIRY NC	5.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KATZ, ROBERT	6.2 NAME	BERNARD SCHECHTER
STREET ADDRESS	475 FIFTH AVENUE, 3RD FLOOR	6.3 STREET ADDRESS	100 WOLTZ STREET
CITY-ST-ZIP	NEW YORK NY 10017	6.4 CITY-ST-ZIP	MT AIRY NC

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.

SIGNATURE

[Signature]

CF

1/29/98

CR2E034 (10/97)