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 # F9600001493 (3)

STONECRAIG KENNELS, INC.

Principal Place of Business Mailing Address 553 W BUTTERNUT RD 553 BUTTERNUT RD SUMMERVILLE SC 29483 SUMMERVILLE SC 29483 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 75-2316859 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VOLPE, HARRY 3521 NE 23RD AVE. 82 Street Address (P.O. Box Number is Not Acceptable) LIGHTHOUSE POINT FL 33064 63 City 84 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 Igmiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed runne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 101.6 RT 9 BOX 8- 553 W Butternet Rd NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADORESS SLATON-TX-70364_Summerville, SC 9983 CITY-ST-7IF 1.4 CITY - ST- ZIF Change Addition TITLE 2.1 TITLE CRAIG, ROBERT 2.2 NAME NAME AT 3 BOX 8 - 553 W Bertherut Rd STREET ADDRESS 2.3 STREET ADDRESS SLATON TX 78364 Summervelle, SC 29483 CITY-ST-ZIP 2 4 CITY-ST-7IF DELETE Addition TITLE 3 1 11TLE Change NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7IP 3.4. CITY - ST - ZIP Change DELETE Addition TITLE 4.1 THLE NAME 4. 2 NAMI STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-2IP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.11IILE NAME 5.2 NAME STREET ADDRESS 5.3 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 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 emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

5.4 CITY - ST - 2IP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 11TLF 6.2 NAME

CIONATURE

CITY - ST - ZIF

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

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DELETE

813-851-5561

☐ Change

Addition

FILED

Jan 20 1998 8:00am

Secretary of State