FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.

CORPORATION ANNUAL REPORT



Sandra B. Mortha

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700000656 (5)

THE EIBL COMPANIES A HOLDING CORPORATION

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



Frincipal riac	e of Business	Mailing Address		
411 8 COUNT PALM BCH FL		411 S COUNTY RD #200		
FAUM DOTI FI	- 33400	PALM BCH FL 33408		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualified
				02/07/1997
2. Principal P	lace of Business	2a. Mailing Address	ı n/	4. FEL Number Applied For
211231	Bradley Ylace	26 231 Brad	lon Pla	52-2009586 Not Applicable
Suite, Apt.	#, etc.	Suite Apt. # etc.	17	— \$8.75 Additional
22 <u>2</u> C	00	27 200		5. Certificate of Status Desired Fee Required
23 Pálm	Beach FL	28 Yalm Beac	h F	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
¬多211	Pintry DASA	- 702110A	_ Country_ A	8. This corporation owes or has paid the current year Intangible
24 <u>337</u>	BU 25 1911 DEACH		30 NOH	Personal Property Tax due June 30. Yes X No
	9. Name and Address of Current R	legistered Agent		10. Name and Address of New Registered Agent
	IHNER, BRUCE W ESQ		81 Nam	lwe
	I S COUNTY RD #200		82 Stree	eet Address (P.O. Box Number is Not Acceptable)
PAL	LM B CH FL 33408		Li	
			63	
			B4 City	las la transfer de la contraction de la contract
			84 City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of	nd 607.1508, Florida Statutes	s, the above-name	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obligatio	ris of, Section 607.0505, Flor	ida Statutes.	osiporation o social of allicotors. This copy account the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent as	od litle if applicable (NOTE:	Registered Agent signal	nature required when reinstating) DATE
12.	OFFICERS AND D	19.4.5	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	Change Addition
NAME	EBL, SID H		1.2 NAME	231 Bradley Place # 200
STREET ADDRESS	411 S COUNTY RD #200		1.3 STREET ADDRES	535
CITY-ST-ZIP	PALM BCH FL 33408		1.4 CITY-ST-ZIP	T PALM BEACH, FL 33480
TITLE		DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	ESS
CITY-ST-ZIP			2 4 CHTY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME !			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	222
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETE	4.1 TOTLE	☐ Change ☐ Addition
NAME			4. 2 NAME	- Constant
STREET ADDRESS			4.3 STREET ADDRESS	200
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	_ orange _ Notition
STREET ADDRESS			5.3 STREET ADDRESS	22.
				.33
CITY-ST-ZIP TITLE		DELETE	54 CITY-S1-ZIP	☐ Change ☐ Addition
		L.J DELETE	6 1 TITLE	☐ Change ☐ Addition
NAME ATREET ARROSSOS			6.2 NAME	
STREET ADDRESS		17	6.3 STREET ADDRESS	SS
CITY-ST-ZIP	ortific that the information and the		6.4 CITY - \$1 -ZIP	
indicated d	OA fhis annual report or supplemental an	umfiai at∖naa∩lis affice and accuar	fate and that mive	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information signature shall have the same legal effect as if made under oath; that I am an
officer or o	director of the corporation or the receive or Block 13 if changed, or on an attachn	r ov turstequeruppewered to ex	ecute this report	t as required by Chapter 607, Florida Statutes; and that my name appears in