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

FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 OCT 21 PM 2: 50 **DOCUMENT #** F97000001375 (1) SECRETARY OF STATE TALLAHASSEE, FLORIDA NEBBIRAC, INC. Principal Place of Business Mailing Address 2755 CURLEW RD LOT 110 2755 CURLEW RD LOT 110 PALM HARBOR FL 34648 PALM HARBOR FL 34648 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/18/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 56-1827936 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zìp Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALLEN, HOWARD W 2755 CURLEW RD LOT 110 Street Address (P.O. Box Number Is Not Acceptable) PALM HARBOR FL 34648 83 84 City Zip Code 85 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 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 4283--01047--009 TITLE DELETE 1,1 TITLE 30000267· -10/28/98-NAME ALLEN, HOWARD W 1.2 NAME 2755 CURLEW RD LOT 110 STREET ADDRESS 1.3 STREET ADDRESS ****550.00 ****550.00 PALM HARBOR FL 34648 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TOTLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Channe Addition TITLE 4.1 TITLE 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

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 hay 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 out; 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.

5 2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

NAME

TITLE XAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: Howar's N

DELETE

10-18-98

8137856880

Change

___ Addition