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

CITY-ST-ZIP

SIGNATURE

FILED PROFIT FLORIDA DEPARTMENT OF STATE Feb 02 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (0)TRLC, INC. Principal Place of Business Mailing Address 7748 VISCAYA CIRCLE 7448 VISCAYA CIRCLE MARGATE FL 33063 MARGATE FL 33063 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/06/1984 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 21 59-236031 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaigh Financing 28 Trust Fund Contribution Added to Fees 23 Country Country 8. This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MAGNER, MARIE 7448 VISCAYA CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063 83 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. hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 Change Addition DELETE 1.1 TITLE ☐ Change TITLE Jorin 1.2 NAME R2E034 NAME MAGNER, MARIE STREET ADDRESS 7448 VISCAYA CIRCLE 1.3 STREET ADDRESS Era Rranch hake 33308 MARGATE FL. 1.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETÉ t / Secretary Richard 5 5R TITLE 2.1 TITLE President NAME MAGNER, RICHARD J SR 2.2 NAME 7448 Viscoya Circle 7448 VISCAYA CIRCLE STREET ADDRESS 2.3 STREET ADDRESS marg ate MARGATE FL 2. 4 CITY - ST-ZIP CITY-ST-ZIF __ DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 arta-(firment with an address.