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 #

H12406

(5)

PIK-A-TEE +, INC.

Mailing Address

700 S. JOHN RODES BLVD

Principal Place of Business

700 S. JOHN RODES BLVD

FILED May 06 1998 8:00am Secretary of State

| UNIT D-2 MELBOURNE FL 32901 | UNIT D-2 MELBOURNE FL 32901 | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/10/1984 | | | |
|---|-----------------------------|-----------------|---|-----------------------------------|--|--|
| 2. Principal Place of Business 17 700 S. July Rober RLW | 2a. Mailing Address | | 4. FEI Number | Applied For | | |
| Suite, Apt #, etc. | Suite, Apt. #, etc. | | 59-2431333 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| Olly & State bourne. Fl- | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| 20 2904 25 CT. 1.17 | Z(p) Cou | untry | 8. This corporation owes or has paid the curr Personal Property Tax due June 30. | rent year Intangible Yes No | | |
| 9, Name and Address of Current F | legistered Agent | | 10. Name and Address of New Registered Agent | | | |
| REINMAN, JAMES | | 81 Name | | | | |
| MELBOURNE FL 32901 | | 82 Street Addre | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | 83 | | | | |
| | | 84 City | FL | 85 Zip Code | | |
| | | | | | | |

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 onligations of, Section 607.0505, Florida Statutes. | | | | | | | | | |
|---|--|-----------------------------|-----------------------------------|---|-----------------------|-------------------|--|--|--|
| SIGNATURE | Signature, typed or printed name of regetored agent and full | e r applicable (NOTE | Registered Agent signature requir | ed when reinstating) | DATE | | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | |
| TITLE | PD | ☐ DEL E TE | 1.5 TITLE | | Change | Addition | | | |
| NAME | FARNHAM, RONALD | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 1593 RICHARDS DR., N.E. | | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | PALM BAY FL | | 1.4 City-ST-ZIP | | | | | | |
| TITLE | STD | DELETE | 2.1 TITLE | | Change | ☐ Addition | | | |
| NAME | Farmham, Diana | | 2.2 NAME | | | | | | |
| STREET ADDRESS | 1593 RICHARD DR NE | | 2.3 STREET ADDRESS | | | · | | | |
| CITY-ST-ZIP | PALM BAY FL | | 2. 4 CHTY - ST - ZIP | | | [| | | |
| TITLE | | DELETE | 3.1 TITLE | | Change | Addition | | | |
| NAME | | | 3.2 NAME | | | | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | | |
| CITY+ST-ZIP | | | 3.4. CITY - ST - 7IP | | | | | | |
| TITLE | | DELETE | 4.1 TITLE | | ☐ Change | ☐ Addition | | | |
| NAME | | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 4 4 CITY - ST - ZIP | | | | | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | Change | Addition | | | |
| NAME [| | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | | | | | |
| TITLE | | ☐ DELETE | 61 TITLE | | ☐ Change | Addition Addition | | | |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 6.4 CITY - ST - ZIP | | . | | | | |
| 14. I hereby c | pertify that the information supplied with this | tiling does not qualify for | r the exemption stated in | Section 119.07(3)(i), Florida Statutes, I fur | ther certify that the | Intermation | | | |

Indicated on this annual report or supplied with this hing does not quality for the exemption stated in Section 119.0/(3)(i), Florida Statutes. Further certify that the informatio indicated on this annual report or suppliemental 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 of 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 of an attaching with an advires.

GNATURE: