FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** H52409 (0) LARRY'S MOBILE, INC. Principal Place of Business Mailing Address 8740 NW 15TH COURT PO BOX 450234 PLANTATION FL 33322 SUNRISE FL 33345 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/16/1985 2a. Mailing Address 4. FEI Number Applied For 59-2537950 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box lamarac Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name 980 CANALVIEW BLVD N-5 Street Address (P.O. Box Number is Not Acceptable) 82 980 CANALVIEW BLVD. N.S. PORT ORANGE FL 32119 84 lamarac 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 trigistered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE URIST, L. 1.2 NAME NAME 9404 N.W. 81 Court 8740 NW 15TH COURT STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL** Tamarac, FL 33321 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE TITLE URIST, ALBA NAME 2.2 NAME 9404 N.W. 81 Court Tamarec, FL 33321 **8740 NW 15TH COURT** STREET ADDRESS 2.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-Z#P 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TOTALE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIP 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 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.

SIGNATURE:

4/7/98
954-724-4407

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

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DELETE

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SIGNATURE:

CITY-ST-ZIP

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