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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandia B. MoAham FILED ANNUAL REPORT Secretary of State JUL 10 AM 8: 44 DIVISION OF CORPORATIONS 1997 SECRETARY OF STATE DOCUMENT # H80776 (8) AHASSEE, FLORIDA CHERRY INSULATION INCORPORATED Principal Place of Business Mailing Address 4122 E 98TH AVE TAMPA FL 33617 4122 E 98TH AVE TAMPA FL 33617-4431 3. Date incorporated or Qualified 3a. Date of Last Report 10/10/1985 07/25/1996 2. Principal Place of Business 28. Mailing Address 4. FET Number Applied For 59-2625552 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yos ☐ No 24 25 29 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent _CHERRY, VICKI 81 Name 4122 E. 98TH AVENUE 82 **TAMPA FL 33617** 83 84 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 quigations of Section 607.0505, Florida Statutes nied name of registeric diagont and fille it as TICK) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. OFFICERS AND DIRLETC 13. 900002237779 -07/14/97--01169--022 DELFTE TITLE 1.1 701.6 CHERRY, DALE NAME 1.2 NAME **CR2E034** 4122 E. 98TH AVE. STREET ADDRESS 13 STREET ADDRESS ****165.00 ****165.00 TAMPA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 THEF CHERRY, VICKI NAME 2.2 NAME 4122 E. 98TH AVE. STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE VALUE LIMPOUS NAME 3.2 NAME 4122 E 98TH AVE STREET ADDRESS 3 3 STREET ADDRESS TAMPA FL 3 4. CITY - ST- ZIP CITY - ST - ZIP 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 DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STHEET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE Addition TALLE 6.1 TITLE NAME AME 6.2 STREET ADDRESS TREET ADDRESS 6.3 17 - S1 - ZIP CITY-ST-ZIP exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the accurate and that my signature shall have the same legal effect as if made under oath; that execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the information supplied with this filing does not qualify for the information indicated on this annual report or supplemental annual report is true and tam an officer or director of the corporation or the receiver or trusted ompowered to appears in Block 12 or Block 13 if changed, or of an attachment with an address.

11-15 07 (812)000-1-01