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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H82429

(2)

CURTISS BERRY. INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 230 S.W. 30TH STREET 230 S.W. 30TH STREET FT. LAUDERDALE FL 33315-3139 FT. LAUDERDALE FL 33315-3139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/24/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2593717 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** BERRY, CURTISS C. 601 S.W. 19TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33315 84 City 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 obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typicid or printed manife of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE BERRY, CURTISS C. NAME 1.2 NAME 601 S.W. 19TH ST. STREET ADORESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ___ Addition Change TITLE 2.1 TITLE BERRY, PATRICIA G. NAME 601 S.W. 19TH ST. STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition BERRY, MICHAEL C 3.2 NAME 601 SW 19 ST STREET ADDRESS 3.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 3.4. CITY - ST- ZIP L. DELETE TITLE Спапре Addition 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 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - S1 - ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 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 corporated or the receiver of the deceiver of the deceiver of the deceiver of the deceiver of the corporated or the deceiver of the de

SIGNATURE:

APRIL 23 1998

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