**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 09 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)H83085 G. HIRSCH HOLDINGS OF FLORIDA, INC. Principal Place of Business Mailing Address 59 BAYMONT ST. 59 BAYMONT ST. **CLEARWATER FL 34630 CLEARWATER FL 34630** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/30/1985 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2596587 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8, Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zφ Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name DORAN, JOHN 59 BAYMONT ST 82 Street Address (P.O. Box Number is Not Acceptable) CLEARWATER FL 33515 83 84 City 85 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 troth, 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 (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE HIRSCH, GERARD NAME 1.2 NAME 755 MITCHELL AVE STREET ADDRESS 1.3 STREET ADDRESS MONTREAL, QUEBEC CAN CITY-SI-ZIP 14 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-7IP DELF1E Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE 4.1 TITLE Change Addition 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 NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

SIGNATURE:

NAME

DELETE

6.3 STREET ADDRESS 6.4 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 supplied of later and 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 his receiver or trustee on the security 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 his receiver or trustee on the security 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 same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation or his report is true.

Change

☐ Addition