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

Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** H91625 (4) GWENEL, INC. Principal Place of Business Mailing Address 732 NE 3RD ST 732 NE 3RD ST POMPANO BCH FL 33060 POMPANO BCH FL 33060 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/24/1985 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2616354 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 \Box 23 28 Trust Fund Contribution Added to Fees Zip Country Country *7*ıb 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LARCHE, JR J Name Woodrow W. Cheshire 2780 E OAKLAND PARK BLVD 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33306 83 Pompano Beach, FL 33060 84 City 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 obligations of, Section 607.0505, Florida Statutes. W. W. Cheshire, V. Pres. SIGNATURE (NOTE: Registered Agent signature OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change TITLE DELETÉ Addition 11 TITLE CHESHIRE, ANGIE M. 1.2 NAME NAME **732 N.E. 3 STREET** STREET ADDRESS 1.3 STREET ADDRESS POMPANO BCH. FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE CHESHIRE, W.W. NAME 2.2 NAME **732 N.E. 3 STREET** STREET ADDRESS 2.3 STREET ADDRESS POMPANO BCH. FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE COLLIER, GWEN C. NAME 3.2 NAME 71 S.E. FOURTH AVENUE STREET ADDRESS 3.3 STREET ADDRESS DEERFIELD BCH. FL 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 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 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP 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.

FILED