**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandre B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name H97023 (6)MACHRISTE, INC. Principal Place of Business Mailing Address 100 EAST 19TH STREET 100 EAST 19TH STREET PANAMA CITY FL 32405 PANAMA CITY FL 32405 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/31/1986 2. Principal Place of Business 2a. Mailing Address Applied For 59-2637876 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 6. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Г Added to Fees Country Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes 25 Personal Property Tax due June 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SOUTHERLAND, MARY SUE 100 EAST 19 STREET 82 Street Address (P.O. Box Number is Not Acceptable) PANAMA CITY FL 32405 83 84 City 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 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 registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE SOUTHERLAND, W. STEVE MALIF 1.2 NAME 100 EAST 19TH STREET STREET ADDRESS 1.3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 1.4 City-St-7IP DELETE Change Addition TITLE 2.1 TITLE SOUTHERLAND, MARY SUE NAME 2.2 NAME 100 EAST 19TH STREET STREET ADORESS 2.3 STREET ADORESS PANAMA CITY FL CITY-ST-ZW 2. 4 CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE SOUTHERLAND, STEVE II NAME 3.2 NAME STREET ADDRESS 100 E 19 ST 3 3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETÉ Change Addition TITLE 4.1 TITLE WAY, SUZANNE S. 4 2 NAME NAME 100 EAST 19TH STREET STREET ADDRESS A 3 STREET ADORESS PANAMA CITY FL COY-ST-749 4.4 CITY-ST-ZIP DELETE Change 5.1 TITLE Addition TITLE SOUTHERLAND, TIM NAME 5.2 NAME 100 E 19 ST STREET ADDRESS 5 3 STREET ADDRESS PANAMA CITY FL CITY-ST-ZIP 5 4 CITY - ST - ZIP TITLE DELETE 6 1 TITLE Change Addition

14. I hereby 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.

6.4 CITY - ST-ZIP

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

MALE

STREET ADDRESS

CITY-ST-ZIP

SOUTHERLAND, SHANE

100 E 19 ST

PANAMA CITY FL

April 24, 1998

(850) 185-8532