SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 JUL 21 PM 12:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # J06201 (4)

1. Corporation Name
BERTOL, INC.

Principal Place of Business	Mailing Address
701 E GULF BLVD INDIAN ROCKS BCH FL 34635 US	701 E GULF BLVD INDIAN ROCKS BCH FL 34635 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/26/1986
3a. Date of Last Report: 03/18/1994

2. Principal Place of Business
21: 309 HARBOR DRIVE
Suite, Apt. #, etc. 22: —
City & State 23: BELLEAIR BEACH, FLA.
Zip 24: 34634 County 25: U.S.A.

2a. Mailing Address
26: 309 HARBOR DRIVE
Suite, Apt. #, etc. 27: —
City & State 28: BELLEAIR BEACH, FLA.
Zip 29: 34634 Country 30: U.S.A

4. FEI Number: 59-2664443 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

FOX, GREGORY A., ESQ.
FOX & FOX, P.A.
2380 DREW STREET, STE 3
CLEARWATER FL 34625

10. Name and Address of New Registered Agent

81 Name: FOX, GREGORY A., ESQ.
82 Street Address (P.O. Box Number is Not Acceptable): 28050 U.S. 19 N
83: SUITE 100.
84 City: CLEARWATER FL 85 Zip Code: 34621

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, type or print name of registered agent and title if applicable) (NOTE: Registered Agent signature required when mandated) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	11 TITLE	PST	☒ Change ☐ Addition
NAME	SZASZ, ROBERT	12 NAME	SZASZ, ROBERT	
STREET ADDRESS	701 E GULF BLVD	13 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	14 CITY ST ZIP	BELLEAIR BEACH, FL, 34634	
TITLE	VPS	21 TITLE	VP	☒ Change ☐ Addition
NAME	SZASZ, STEVE	22 NAME	SZASZ, STEVE.	
STREET ADDRESS	701 E GULF BLVD	23 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	24 CITY ST ZIP	BELLEAIR BEACH, FL, 34634	
TITLE	TD	31 TITLE	TD	☒ Change ☐ Addition
NAME	SZASZ, MARY	32 NAME	SZASZ, MARY	
STREET ADDRESS	701 E GULF BLVD	33 STREET ADDRESS	309 HARBOR DRIVE	
CITY ST ZIP	INDIAN ROCKS BCH FL	34 CITY ST ZIP	BELLEAIR BEACH, FL. 34634	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY ST ZIP		44 CITY ST ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY ST ZIP		54 CITY ST ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		64 CITY ST ZIP		

CR2E034 (3/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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, added or deleted.

SIGNATURE: _____ STEVE SZASZ 7/17/95 865-0198
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL (Date) (Daytime Phone #)

0114726 CR