FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 13 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J06457 (2)EDMAR REALTY CO., INC. Principal Place of Business Mailing Address C/O A. M. KUTZ 4561 OAK TREE COURT C/O A. M. KUTZ 4561 OAK TREE COURT **DELRAY BEACH FL 33445** DELRAY BEACH FL 33445 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/28/1986 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 NOT APPLICABLE Not Applicable Suite, Apt. #, etc. Suite. Apt. #. etc. \$6.75 Additional 6. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KUTZ, ALEXANDER M. EOITH \mathcal{B} **4561 OAK TREE COURT** 82 83 **DELRAY BEACH FL 33445** Zip Code 33445 Beach 11. Tursuant 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, Elorida Statutes. SIGNATURE Flegislered Agent signature required when reinstating 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Secretary-Treasurer Change KUTZ, ALEXANDER M. Edith B. Kutz 1.2 NAME 4561 OAK TREE CT. STREET ADDRESS 4561 OAK Tree Court 1.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Delray Beach, FL 33L DELETE TITLE 2.1 TITLE NAME KUTZ, ALEXANDER M. 2.2 NAME STREET ADDRESS 4561 OAK TREE CT. 2.3 STREET ADDRESS **DELRAY BEACH FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change 51 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

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

on an attachment with an address.

CITY-ST-ZIP

SIGNATURE:

Secretary 3.24.98 561.498 4388 FAITH B KULZ