FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 12 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name J53432 (7) COMMERCIAL TROPICAL FLORIDA, INC. Principal Place of Business Mailing Address % JOE L. SHARIT, JR 99 SIXTH ST. S.W. 🐃 JOE L. SHARIT. JR 99 SIXTH ST. S.W. DO NOT WRITE IN THIS SPACE WINTER HAVEN FL 33680 WINTER HAVEN FL 33680 3. Date Incorporated or Qualified 01/26/1987 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 59-2764945 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SHARIT, JOE L. JR 99 SIXTH STREET S.W. 82 Street Address (P.O. Box Number is Not Acceptable) WINTER HAVEN FL 33880 83 City 84 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 607.0506, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Addition TITLE MAME CARLOS, JUAN JOSE 1.2 NAME 251 CRANDON BLVD STREET ADDRESS 1.3 STREET ADDRESS KEY BISCAYNE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SHARIT, JOE L.,JR. NAME 2.2 NAME 99-6TH STREET, S.W. 2.3 STREET ADDRESS STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Change ☐ Addition NAME HART, RICHARD A. 3.2 NAME STREET ADDRESS 141 CENTRAL AVE. W. 3.3 STREET ADDRESS WINTER HAVEN FL CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition

6 1 TITLE

6 2 NAME 6.3 STREET ADDRESS

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 is supplemental annual report is true and accurate any that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corrotation or the uceiver 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 attractment with appenders.

6.4 CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CR2E034