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

FILED May 12 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9) PHOENIX INDUSTRIES, INC. Principal Place of Business Mailing Address 26320 SW 191 COURT 26320 SW 131 COURT PRINCETON FL 33032-8941 PRINCETON FL 33032-8941 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1987 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2833469 21 26 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 Country Zip 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOODMAN, STANLEY E 909 E. 8TH AVE. Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 City Zip Code 11. Pursuant to the provisions of Soctions 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. Soction 607.0505. Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition EDGAR, DON W NAME 1.2 NAME 26320 SW 131 COURT STREET ADDRESS 1.3 STREET ADDRESS PRINCETON FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 21 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP ☐ DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP ☐ DELETE Addition Change TITLE 41 TITLE 4. 2 NAME NAME

6.4 CITY-ST-ZIP CITY-ST-ZIP 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 of supplemental vinual 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 corpolation or/the recovery or frusted empowered expressive 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

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADORESS

5.4 CITY-ST-ZIP

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

61 TITLE

62 NAME

DELETE

DELETE

SIGNATURE:

STREET ADORESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

TITLE

NAME

4-29-98 305 2582909

Change

Change

Addition

Addition

CR2E034 (10/97