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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

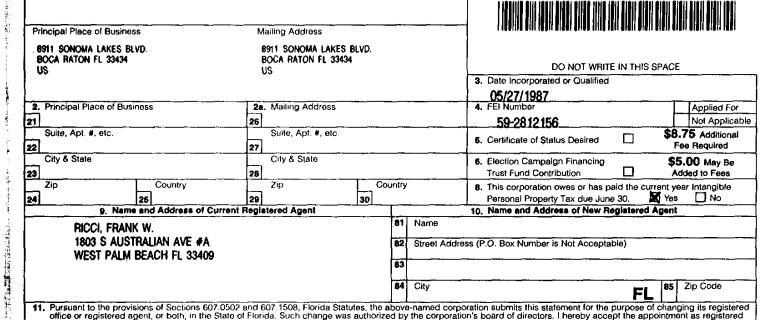
Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J74539

(4)

DR. VINYL OF SOUTH FLORIDA, INC.

FILED Apr 13 1998 8:00am Secretary of State



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 it a			e required when reinstating) DATE
12. OFFICERS AND DIRECTORS			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☑ DELETÉ	1.1 TITLE	☐ Change ☐ Addition
HAME	HOLMES, MALCOLM		1.2 NAME	Hormes muccorn
STREET ADDRESS	8911 SONOMA LAKES BLVD		1.3 STREET ADDRESS	10548 PLAINVIEW
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP	HOLMES MALCOLM 10548 PLAINVIEW CL BOKA RATON FL 33498
TITLE	ST	DELETE	21 11716	harme Addition
NAME	HOLMES, MALCOLM		2.2 NAME	Horwes wirecorm
STREET ADDRESS	8911 SONOMA LAKES BLVD		2.3 STREET ADDRESS	HOLMES MALCOLM 10548 PLAINVIEW CL BOCK RATOR FL 33498.
CITY-SY-ZIP	BOCA RATON FL		2. 4 CITY-ST-ZIP	BOCK KNTOW FL 33498.
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	1
T/TLE		DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS	1		5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY - ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITYST2IP	i		64 C(TV - ST - 7)P	

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.

SIGNATURE:

SIGNATURE: