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

FILED Mar 03 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 #
1. Corporation Name K04425 (O) ACUITY, INC. Mailing Address Principal Place of Business 1125 OLD DIXIE HWY % PAUL J. NICOLETTI STE 5 317 10TH STREET LAKE PARK FL 33403 WEST PALM BEACH FL 33401 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/30/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0020795 1125 Old Dixie Hwy Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Lake Park, FL 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 33403 USA ☐ Yes 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NICOLETTI, PAUL J. Jeffrey Foreman
Street Address (P.O. Box Number is Not Acceptable) 317 10TH STREET 82 WEST PALM BEACH FL 33401 1125 Old Dixie Highway 83 Suite 5 **B4** City 33403 Lake Park betions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered coept the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Segi agent. I am far Jeffrey Foreman SIGNATURE (NOTE: Registered Agent signature required when sensatire) name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/9) 13. DELETE 1.1 TITLE Change Addition TITLE FOREMAN, JEFFREY NAME 1.2 NAME 1125 OLD DIXIE HWY. #5 STREET ADDRESS 1.3 STREET ADDRESS LAKE PARK FL CITY-ST-ZIE 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 21 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change ___ Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change ___ Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST- ZIP 14. Thereby certify that the information supplied with this filling 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 acciver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

attachment with an address.

Block 12 or Block 13 if changed, or on an

NAME

STREET ADDRESS

Jeffrey Foreman 2-27-98 President