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

FILED May 07 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K09032 (9)E & G INVESTORS, INC. Principal Place of Business Mailing Address **678 SOUTH GULFVIEW BOULEVARD** 678 SOUTH GULFVIEW BOULEVARD CLEARWATER BEACH FL 34630 CLEARWATER BEACH FL 34630 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/28/1987 2e. Mailing Address 2. Principal Place of Business Applied For Not Applicable 21 26 59-2877424 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intengible Yes 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name POLITIS, GREGORY **678 SOUTH GULFVIEW BOULEVARD** 82 Street Address (P.O. Box Number is Not Acceptable) **CLEARWATER FL 34630** 83 84 City Zip Code 85 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 tite 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 ANASTASOPOULOS, ELIAS NAME 1.2 NAME STREET ADDRESS 630 S. GULFVIEW BLVD. 1.3 STREET ADDRESS CITY - ST - ZIP CLEARWATER BEACH FL 1.4 CITY - ST - ZIP DELETÉ Change Addition TITLE 2.1 TITLE NAME POLITIS, GREGORY 22 NAME 965 S BAYSHORE BLVD STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP S HARBOR FL 2. 4 CITY - ST - ZIP ☐ Addition DELETE Change TITLE 3.1 TITLE NAME 32 NAME

NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

DELETE

DELETE

DELETE

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 toroprotation or the receiver or trusted 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: CELO

STREET ADDRESS

STREET ADDRESS

STREET ADORESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

Change

Change

Change

Addition

Addition

Addition