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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 **DOCUMENT # K25658** (1) 1846 E, INC. Principal Place of Business Mailing Address % DONALD BUIKUS **% DONALD BUIKUS** 1946 N.W. 54 AVE. 1946 N.W. 54 AVE. MARGATE FL 33063 MARGATE FL 33063-3701 3. Date Incorporated or Qualified 3a. Date of Last Report 06/08/1988 04/18/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-0058485 Not Applicable 26 Suite, Apt. #, etc. Suite Apt #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 **Trust Fund Contribution** Added to Fees Country Country 2mZip 8. This corporation has liability for intangible tax under s. 199.032, Yes No. 24 25 29 30 Florida Statutes 10. Name and Address of New Registered g. Name and Address of Current Registered Agent Agent Name BUIKUS, DONALD 1946 N.W. 54 AVE. Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063 В3 RA 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 607.0505, Florida Statutes. SIGNATURE Signature, typical or propied had to be tegistered agent and titling applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DP DELETE ☐ Change ☐ Addition 3101 1.1 TITLE BUIKUS, DONALD 1.2 NAME NAMÉ 1946 NW 54TH AVE. 1.3 STREET ADDRESS STREET ADDRESS MARGATE FL 1.4 CITY-ST-ZIP CITY - ST. ZIF DVP DELETE Change Addition T01:E 2.1 TITLE BUIKUS, ROBERT 2.2 NAME MAME 1946 NW 54TH AVE. 2.3 STREET ADDRESS STREET ADDRESS MARGATE FL 2.4 CITY-ST-ZIP CLY ST ZF DŠ DELETE Change Addition DISE 3.1 TITLE **BUIKUS, FLORENCE** NAMI 3.2 NAME 1946 NW 54TH AVE. SHREET ADDRESS 3.3 STREET ADDRESS MARGATE FL 3.4. CITY- \$7-2IP CITY - \$1 - ZIF DELETE Change ■ Addition TitleF 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - S1 - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 111 LF 5.1 TITLE NAMÉ 5.2 NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change ☐ Addition 10.6 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 CITY-ST-2IP 14. I do nereby certify that the information supplies 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 appears proof of 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changing or on an attachment with an address.

DONALD H BUIKUS 4-2-97 (954) 974-2704