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

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NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

FILED Mar 24 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) K40734 POSITIVE ENTERPRISES, INC. Principal Place of Business Mailing Address 7240 GARFIELD STREET 7240 GARFIELD STREET HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/24/1988 2. Principal Place of Business 21 6733 Txora 2a. Mailing Address. 4. FEI Number Applied For 6733 Drive 26 65-0081797 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FL Miramar Mhramac  $\Box$ 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BUTTS, TIMOTHY J. 7240 GARFIELD ST. 82 Number is Not Acceptable) HOLLYWOOD FL 33024 **B3** 84 CityMiramar 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 chilipations of, Section 607 0505, Florida Statutes. Butts imothy SIGNATU of registered agent and title if applic 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change TITLE DELETE Addition BUTTS, TIMOTHY J. NAME 1.2 NAME 7240 GARFIELD ST. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL 33024 1.4 CITY-ST-ZIP City-St-7iP DELETE Addition TITLE 21 TITLE **BUTTS, MAKEISHA** NAME 22 NAME 7240 GARFIELD ST. STREET ADDRESS 2.3 STREET ADDRESS **HOLLYWOOD FL 33024** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE **BUTTS, DONNA M** 3.2 NAME NAME 7240 GARFIELD ST 3.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 3.4. CITY - ST - ZiP CITY-ST-ZIP Addition DELETE TITLE **4.1** TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change DELFTE Addition TETL F 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition

6.1 TITLE 6.2 NAME

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 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 in an attachment with an address.

6.3 STREET ADDRESS