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PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K44074

(8)

REMINGTON PLANTS, INCORPORATED

FILED Jan 29 1998 8:00am Secretary of State



CR2E034

Principal Place of Business Mailing Address 17437 JUPITER FARMS RD 17437 JUPITER FARMS RD JUPITER FL 33478 JUPITER FL 33478 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/07/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0081154 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 24 25 Yes 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent OGILVIS, R. L. 17437 JUPITER FARMS RD 82 Street Address (P.O. Box Number is Not Acceptable) JUPITER FL 33478 83 Zip Code 85 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 if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TATLE Change Addition 1.1 TITLE NAME OGILVIS, REMY 1.2 NAME 17437 JUPITER FARMS RD STREET ADDRESS 1.3 STREET ADDRESS JUPITER FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE ☐ DELETE Change Addition NAME 3,2 NAME STREET ADDRESS 3.3 STREET ADDRESS CiTY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY-ST-ZIP DELETE TITLE ___ Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 6.2 NAME

> 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I hereby 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 empressed 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 attraction with an address.

SIGNATURE