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

1

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

FILED Mar 31 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9)**TUPIN AND US CORPORATION** Principal Place of Business Mailing Address 2001 S WOODLAND BLVD % RICHARD EDWARD WALL 2823 TAMARACK TR 2823 TAMARACK TR DO NOT WRITE IN THIS SPACE ORLANDO FL 32722 APOPKA FL 32703 3. Date Incorporated or Qualified 11/09/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-29 16444 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 26 Added to Fees Zip Zip Country This corporation owes or has paid the currept year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WALL RICHARD EDWARD 2823 TAMARACK TR 82 Street Address (P.O. Box Number is Not Acceptable) APOPKA FL 32703 83 84 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS CR2E034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE WALL, RICHARD EDWARD NAME 1.2 NAME 2823 TAMARACK TR STREET ADDRESS 1.3 STREET ADDRESS APOPKA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE WALL, SUSAN MAE 22 NAME 2823 TAMARACK TR STREET ADDRESS 2.3 STREET ADDRESS APOPKA FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE 4.1 TITLE Change ___ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition TITLE 5.1 TITLE Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 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 on an attachment with an address.

6.1 TITLE

6.2 NAME

DELETE

any-738-9786

Change

___ Addition