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

PROFIT CORPORATION ANNUAL REPORT **1998**	FLORIDA DEPARTMENT OF STATE **Sandra B. Mortham** Secretary of State DIVISION OF CORPORATIONS

FILED
Apr 23 1998 8:00am
Secretary of State

DOCUMENT # K46892   (1)

1. Corporation Name
THREE INVESTMENT COMPANY

Principal Place of Business	Mailing Address
% E. LLWYD ECCLESTONE III 1555 PALM BCH LKS BLVD #1100 W PALM BEACH FL 33401-2357	% E. LLWYD ECCLESTONE III 1555 PALM BCH LKS BLVD #1100 W PALM BEACH FL 33401-2357

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified **11/18/1988**	
21	26	4. FEI Number **65-0083846**	Applied For / Not Applicable
Suite, Apt #, etc 22	Suite, Apt #, etc 27	5. Certificate of Status Desired ☒	$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent
ECCLESTONE, E. LLWYD III 1555 PALM BCH LKS BLVD SUITE 1100 W PALM BEACH FL 33401	81	Name
	82	Street Address (P.O. Box Number is Not Acceptable)
	83	
	84	City FL 85 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, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE **PTSD** ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME **ECCLESTONE,E. LLWYD III**	1.2 NAME	
STREET ADDRESS **1555 PALM BCH LKS BLVD**	1.3 STREET ADDRESS	
CITY-ST-ZIP **W PALM BEACH FL**	1.4 CITY-ST-ZIP	
TITLE **V** ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME **COOPER, RON,**	2.2 NAME	
STREET ADDRESS **1555 PALM BCH LAKES BLVD**	2.3 STREET ADDRESS	
CITY-ST-ZIP **W PALM BCH FL**	2.4 CITY-ST-ZIP	
TITLE ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	3.2 NAME	
STREET ADDRESS	3.3 STREET ADDRESS	
CITY-ST-ZIP	3.4 CITY-ST-ZIP	
TITLE ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	4.2 NAME	
STREET ADDRESS	4.3 STREET ADDRESS	
CITY-ST-ZIP	4.4 CITY-ST-ZIP	
TITLE ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	5.2 NAME	
STREET ADDRESS	5.3 STREET ADDRESS	
CITY-ST-ZIP	5.4 CITY-ST-ZIP	
TITLE ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	6.2 NAME	
STREET ADDRESS	6.3 STREET ADDRESS	
CITY-ST-ZIP	6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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.

SIGNATURE: Ron Cooper _____   4/14/98   561/686-2000