FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT Feb 09 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (0)S & L CAPITAL GROUP, INC. Principal Place of Business Mailing Address 2831 RINGLING BLVD., F-123 2831 RINGLING BLVD., F-123 SARASOTA FL 34237 SARASOTA FL 34237 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 12/30/1988 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0091444 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζĺρ Country Country 8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KLEINBERG, LISA J. 2075 MAIN STREET 82 #1A 83 SARASOTA FL 34237 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 and tamiliar with, and accept the obligations of, Section 607,0505, Florida Statutes. 2-2-58 SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. X DELETE Trus. X Change TITLE 1.1 TITLE HARMON, RICHARD G ふらんしょ NAME 12 NAME CR2E034 8337 TURNBERRY CIRCLE 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 2.1 TITLE Chance Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3,3 STREET ADDRESS CITY-ST-ZIP ITY-ST-ZIP ___ Addition DELETE Change TITLE LE ME NAME 4.3 HEET ADDRESS STREET ADDRESS CITY-SY-ZIP Y-ST-ZIP Addition TITLE DELETE Change STREET ADDRESS FET ANDRESS CITY-ST-ZIP Y - ST - ZIP DELETE Change Addition TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS

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 trusted 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:

(941)953-2228