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Jan 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # K75725 (7)

1. Corporation Name  
3B & 2D CORP.

Principal Place of Business  
5505 64TH WAY. NO  
ST. PETERSBURG FL 33709  
US

Mailing Address  
C/O BONNIE L. SEYMOUR  
6509 33RD AVENUE NO.  
ST. PETERSBURG FL 33710



DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/24/1989

4. FEI Number

59-2950284

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 7071 58th Street No

Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Pinellas Park, FL

24 Zip

25 Pinellas

27 City & State

28

29 Zip

30 Country

9. Name and Address of Current Registered Agent

SEYMOUR, BONNIE LOU  
6509 33RD AVE N  
ST. PETERSBURG FL 33710

10. Name and Address of New Registered Agent

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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME SEYMOUR, BONNIE LOU  
STREET ADDRESS 6509 33RD AVE. N.  
CITY-ST-ZIP ST PETERSBURG FL

TITLE VP ☐ DELETE

NAME RUSSELL, BARBRA JO  
STREET ADDRESS 4922 56TH WAY N  
CITY-ST-ZIP KENNETH CITY FL

TITLE S ☐ DELETE

NAME TRIBIANO, DARA  
STREET ADDRESS 9428 133RD ST., N  
CITY-ST-ZIP SEMINOLE FL

TITLE T ☐ DELETE

NAME KING, DEBBIE  
STREET ADDRESS 1143 MEYERS RD  
CITY-ST-ZIP VENICE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

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.

SIGNATURE:

*Bonnie L. Seymour, Pres.*

1/8/98

813-544-1313

CR2E034 (10/97)