SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

FILED AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** Jul 29 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (6)NAPLES VENTURE GROUP, INC. Principal Place of Business Mailing Address 171 COMMERCIAL BLVD 171 COMMERCIAL BLVD SUITE 17 SUITE 17 NAPLES FL 34104 DO NOT WRITE IN THIS SPACE NAPLES FL 34104 US 3. Date Incorporated or Qualified *05/15/1989* 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 2015 A Elga St 2015 A 26 65-0126077 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be NAPLES IUNPL± Trust Fund Contribution Added to Fees Zip 34109 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No Country Country US-P ひらわ 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SELSOR, SCOTT A. 171 COMMERICAL DLVD ₿2 Street Address (P.O. Box Number is Not Acceptable) SUITE 17 tenteur 83 NAPLES FL 33942 84 NAPLES 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE PSD DELETE 1.1 TITLE Change Addition 512 Henry Dr. NAME SELSOR, SCOTT A. 1.2 NAME 171 COMMERCIAL BLVD, SUITE 17 STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE NAME SELSOR, STACY K. 2.2 NAME STREET ADDRESS 171 COMMERCIAL BLVD, SUITE 17 2.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE 3.1 TITLE DELETE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-\$T-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 Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADORESS 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

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 attackment with an address.

6.4 CITY-ST-ZIP

CITY-ST-ZIP