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

FILED Apr 28 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (1)K92916 O'DWYER COMPANY Principal Place of Business Mailing Address 3114 45TH ST., STE, 5 3114 45TH ST., STE. 5 WEST PALM BEACH FL 33407 WEST PALM BEACH FL 33407 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/23/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0136935 26 21 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 Zip Zφ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 ☐ Yes 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent Name DWYER, DANIEL **3114 45TH STREET** 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 5 WEST PALM BEACH FL 33407 83 84 City Zip Code 85 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 applications up, and accept the obligations of Section 607.0505, Florida Statutes. PRUSIDENT DANIEL M. BUNER SIGNATURE d name of registered agent and title OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition DWYER, DANIEL 3R2E034 NAME 1.2 NAME 3114 45TH ST. UNIT 5 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE 21 TITLE TITLE HEMPELMANN, SANDRA NAME 2.2 NAME 3114 45TH STREET UNIT 5 STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE MCCALL, COLLEEN NAME 3.2 NAME 3114-45TH ST UNIT 5 3 3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE CIAMPI, EILEEN NAME 4. 2 NAME 3114-45TH ST UNIT 5 STREET ADDRESS 4.3 STREET ADDRESS WEST PALM BEACH FL 33407 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition 5.1 TITLE TITLE DWYER, ROBERT 5.2 NAME NAME 3114-45TH ST UNIT 5 5.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-ZIP 5.4 CiTY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

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 13 if changed, at on an attachment with an address?

6.2 NAME

6.3 STREET ADORESS

64 CITY-ST-ZIP

NAME STREET ADDRESS

CITY - ST - ZIP

DONIELM, DWYER 4-20-98 561-684-0135 SIGNATURE: