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# Secretary of State

PROFIT CORPORATION ANNUAL REPORT
**1997**

FLORIDA DEPARTMENT OF STATE
**Sandra B. Mortham**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L07270

1. Corporation Name
BADCO INVESTMENTS, INC.

Principal Place of Business | Mailing Address

| | | | |
|---|---|---|---|
| 2. Principal Place of Business | 2a. Mailing Address | 3. Date Incorporated or Qualified | 3a. Date of Last Report |
| 21 2500 Hollywood Blvd. | 26 2500 Hollywood Blvd. | 08/07/1989 | 02/20/96 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 4. FEI Number | ☐ Applied For ☐ Not Applicable |
| 22 #212 | 27 #212 | 65-0218726 | |
| City & State | City & State | 5. Certificate of Status Desired ☐ | $8.75 Additional Fee Required |
| 23 Hollywood, Fl. | 28 Hollywood, Fl. | 6. Election Campaign Financing Trust Fund Contribution ☐ | $5.00 May Be Added to Fees |
| Zip / Country | Zip / Country | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No | |
| 24 33020 / 25 Broward | 29 33020 / 30 Broward | | |

9. Name and Address of Current Registered Agent

ROSS MANELLA

10. Name and Address of New Registered Agent

81 Name: Ross H. Manella Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 2500 Hollywood Blvd.
83: Suite #212
84 City: Hollywood FL 85 Zip Code: 33020

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 and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: ROSS H. MANELLA 4/7/97
Type or print name of person signing (Typed name is required if signature is illegible) (NOTE: Registered Agent's signature required when reinstating) DATE

| 12 OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| | ☐ DELETE | 11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP | ☐ Change ☐ Addition |
| PSD<br>SHUGAR, MARTIN A.<br>3520 NO. 30TH TERR.<br>HOLLYWOOD, FL. | | | |
| | ☐ DELETE | 21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP | ☐ Change ☐ Addition |
| TD<br>SHUGAR, MAUREEN<br>3520 N. 30TH TERR.<br>HOLLYWOOD, FL. | | | |
| | ☐ DELETE | 31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP | ☐ Change ☐ Addition |
| | ☐ DELETE | 41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP | ☐ Change ☐ Addition |
| | ☐ DELETE | 51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP | ☐ Change ☐ Addition |
| | ☐ DELETE | 61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP | ☐ Change ☐ Addition |

4/18/97

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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 a director or officer 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: Martin Shugar 3/28/97 (954)981-1006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #