FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 10 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name L51636 (3)NATIONWIDE INDUSTRIAL SUPPLY, INC. Principal Place of Business Mailing Address 3706 N. OCEAN BLVD.. #302 3706 N. OCEAN BLVD., #302 FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0173943 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MILES, LINDA 3706 NORTH OCEAN BLVD., #302 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33308 83 Zip Code 84 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change 1.1 TITLE TITLE MILES, LINDA NAME 1.2 NAME 3706 N. OCEAN BLVD.,#302 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CiTY-ST-ZIP DELETE 2.1 TITLE Change TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS

Addition

■ Addition

Addition

Addition

Addition

Addition

Change

Change

6.4 CITY-ST-ZIP 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.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

DELETE

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

TITLE NAME