## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** Apr 23 1998 8:00am FUORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** L59886 TOOJ<del>AY'S X, ING-</del> TOOJAY'S STUART, INC. Principal Place of Business Mailing Address 2440 SE FEDERAL HWY C/O JAY A. BROWN 4084 PGA BLVD. STUART FL 33494 3654 GEORGIA AVE. WEST PALM BEACH FL 33405 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/14/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0184505 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has pald the current year Intangible 24 25 30 Personal Property Tax due June 30. Yes Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROWN, JAY A 3654 **GE**ORGIA AVE. **B2** Street Address (P.O. Box Number is Not Acceptable) WET PALM BCH, FL 33405 83 84 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 reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 VID TITL F DELETE 1.1 TITLE Change X Addition BROWN, JAY A. WILLIAM D. KORENBAUM NAME 1.2 NAME 3654 GEORGIA AVE. 3654 GEORGIA AVENUE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BCH. FL CITY-ST-ZIP WEST PALM BEACH, FL 33405 1.4 CHY-ST-ZIP PSD X DELETE TITLE 21 TITLE X X Change Addition KATZENBERG, MARC J., III NASAF 2.2 NAME JAY A. BROWN 3654 GEORGIA AVE. **STREET ADDRESS** 2.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2.4 CITY - ST- ZIP DELETE TITLE 3.1 TITLE Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY-ST-ZIP 400002499**104**hange -04/24/38-01019-030 DELETE TITLE 5.1 TITLE Addition NAME 5 2 NAME \*\*\*150.00 STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET AODRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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.

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