

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 98 MAR 23 PM 3:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
FILING FEE \$ 188.75		Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE			
1. Name and Mailing Address of Limited Liability Company PROCRAFT INDUSTRIES, L.C. 4226-3 FOWLER ST. FORT MYERS FL 33919		DOCUMENT # L94000000198		1a. Principal Place of Business Address 4226-3 FOWLER ST. FORT MYERS FL 33919	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country		3. Date Organized or Qualified 04/28/1994 3a. State of Formation FL 4. FEI Number 65-0485155 5. Date of Last Report 04/21/1997 6. Certificate of Status Desired ☐ Applied For ☐ Not Applicable ☐ \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent MC GEE, D. TODD CPA 2040 VIRGINIA AVE FORT MYERS FL 33901		8. Name and Address of New Registered Agent/Office Name Matthew Ross Street Address (P.O. Box Number is Not Acceptable) 4226-3 Fowler Street Suite, Apt. #, etc. 000002469760-9 City Fort Myers FL 33901 -03/26/98--01103--007 ****188.75			
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.					
SIGNATURE _____		DATE 3/16/98			
(Registered Agent signature required when reinstating)					
10. Title	Managing Member/Managers	Business Street Address		City, State and Zip Code	
MEM	LMR 396 CORP.,	4226-3 FOWLER ST.		FORT MYERS FL	
MEM	CSL&G DEVELOPMENT, LTD	% 3591 FOWLER ST.		FORT MYERS FL	
MGR	LABODA, GERALD	% 4226-3 FOWLER ST.		FORT MYERS FL	
MGR	LABODA, BRUCE	% 4226-3 FOWLER ST.		FORT MYERS FL	
MGR	ROSS, MATTHEW	% 4226-3 FOWLER ST.		FORT MYERS FL	
MGR	MC GEE, TODD	2040 VIRGINIA AVE.		FORT MYERS FL	

11. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

3/16/98 941-936-5394