FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # M11736 (9) DEL - BO, INC. Principal Place of Business Mailing Address 980 PONDELLA RD 960 PONDELLA RD N FT MYERS FL 33903 N FT MYERS FL 33903 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/22/1985 4. FEI Number 2. Principal Place of Business 21 40 19 N.C. Applied For BOBAY RD Not Applicable 59-2437813 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State ARCA DIA 6. Election Campaign Financing \$5.00 May Be FC. Trust Fund Contribution Added to Fees Country U.S. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MILLER, RONALD L. 2206 HOLLYWOOD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 83 84 City 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. Lam 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 reinstaling) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1 1 TITLE Change Addition BAY KODER BOBARD. NAME **BOBAY, ROBERT** 12 NAME 960 PONDELLA RD 1.3 STREET ADDRESS STREET ADORESS N FT MYERS FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change 2.1 TITLE BOBAY DELMARIE 4019 NE. BOBAY RO. ARCADIA F.C. 342 Addition **BOBAY, DELMARIE** 2.2 NAME NAME 960 PONDELLA RD 2.3 STREET ADDRESS STREET ADDRESS EC. 34266 N FT MYERS FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE **6.1 TITLE**

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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

SIGNATURE:

941 - 494 -0377

6.2 NAME

6.3 STREET ADDRESS

NAME

STREET ADDRESS

CITY-ST-ZIP