FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Jun 18 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **19**98 DIVISION OF CORPORATIONS M17397 **DOCUMENT** # HORT TWITTERRISCS Principal Place of Business Malloy Address 1000 WI MCNAB Rd, Soite 4108 PO BOX 70395 P.S. Box 70395 (53307) DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified Principal Place of Business / Ft 330(9) Applied For Suite, Apt. II, etc. M. M. NAB RJ Not Applicable Suite Apr \$8.75 Additional Fee Required 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Ves □ No 10. Name and Address of New Registered Agent 81 Name Con Sal /Samuel J. Consoli Street Address (P.O. Box Number is Not Acceptable) 5170 N.E. 17th Terr. Ft. Lauderdale, FL 33334 83 84 City Zip Codo 11. Pursuant to the provisions of Sections 607 0602 and 607 1608. 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, it hereby accept the appointment as registered agent. Lam lamiliar with, and accept the obligances of, Section 607 0505, Florida Statutes. SIGNATURE (NOT Higgstered Agent signature required when reinslating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DITER 1.11000 Charige ☐ Addition Samuel J. Consoli 5170 N.E. 17th Terr. 1.2 NAM5 Ft. Lauderdaie, Ft. 33334 STREET ADDRESS La STREET ADDRESS CITY-ST-ZIF 14 OIY ST ZIP 🔲 оптт 21 HH. ... Change __ Addition 9 TTP KYNA STREET ADDRESS 2.3.5 'RELEADORESS POLK ST #202 C(1Y - S1 - 7) 3.1 1001 Change Addition 3.2 NAME

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□ but t TITLE NAME STREET ADDRESS ****150.00 14. Thereby certify that the information is applied indicated on this abroad repeat of such above officer or director of the corporation certific. red qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information face and accurate and that my's gnature strall have the same logal effect as if made under eath, that I am an incovered to execute this report as required by Chapter 607. Florida Statutes, and that my name appears in Block 12 or Block 13 it change a lo

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STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF TITLE



P.O. Box 70395 • Fort Lauderdale, FL 33307-0395

Phone 954.771.4761 • Fax 954.771.9038 • e-mail SCHort@gol.com

Thursday, June 11, 1998

Annual Reports Fi.lings Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

To whom it may concern:

At the end of May I was notified by my account that we had not paid our annual filing fee. When I checked to see why I noticed that we did not receive the report from you to sign and send back as we usually do.

Earlier this year we did change our office address. Perhaps this had something to do with it. Enclosed is a new report filled out that we requested from you on 5-29-98.

We have been in business for 13 years now and have always promptly paid this fee on time. Please excuse this late payment. We will make sure to always pay this one early in the future.

Respectfully yours

Samuel Consoli

President