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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M49286

(1)

FILED Jan 30 1998 8:00am Secretary of State

H & O INVESTMENTS, INC. Principal Place of Business Mailing Address % ORLANDO CATRAMBONE % ORLANDO CATRAMBONE 360 VAN BUREN ST. 360 VAN BUREN ST. HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 03/30/1987 2. Principal Place of Business 2a. Mailing Address 4. FEL Number Applied For 21 59-2825481 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CATRAMBONE, ORLANDO 81 Name 360 VAN BUREN ST. Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33019 83 84 Zìo 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. n DELETE 11 TITLE Change Addition CATRAMBONE, ORLANDO NAME 1.2 NAME 360 VAN BUREN STREET STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE BOYLE, HELEN A. NAME 2.2 NAME 360 VAN BUREN STREET STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE NAME 3.2 NAME STREET AODRESS 3.3 STREET ADDRESS CiTY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Сћапде TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 eport or supplemental annual eport 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Brock 13 lifetangel. grown an algorithment with an order same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Brock 13 lifetangel. grown an algorithment with an order same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee.

6.4 CITY-ST-ZIP

SIGNATURE: