FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M61074 (4) 1. Corporation Name YOUNG AGENCY INC.					IN BIBLI BIBLI BIBLI BABLI ANDLE BIBLI
Principal Place of Business Mailing Address C/O RICHARD A. YOUNG C/O RICHARD A. YOUR 9731 SW 11 ST 9731 SW 11 ST PEMBROKE PINES FL 33125 PEMBROKE PINES FL 3			DO NOT WRITE IN 1		
├─		2a. Mailing Address 26 Suite, Apt. #, etc.		10/20/1987 4. FEI Number 65-0009874	Applied For Not Applicable
22 City & State		City & State		Certificate of Status Desired Election Campaign Financing	\$5.00 May Be
23 Zip 24 3300	Country 25	28 Zip 29 33005	Country 30	Trust Fund Contribution 8. This corporation owes or has paid the Personal Property Tax due June 30.	e current year Intangible
9. Name and Address of Current Registered Agent YOUNG, JODY L. 9731 SW 11 ST PEMBROKE PINES FL 33025			83 84 City		FL 85 Zip Code
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, typical or profess in amount of registered agent and talked agradual directions. (NOTE. Registered Agent signature required when reinstating). DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME STREET ADDRESS	PVD YOUNG, JODY L 9731 S.W. 11TH ST.	☐ DELETE	11 TITLE 12 NAME 1.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	PEMBROKE PINES FL 33025 STD YOUNG, RICHARD	DELETE	1.4 CHY-ST-ZIP 2.1 TITLE 2.2 NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE	9731 S.W. 11TH ST. PEMBROKE PINES FL 33025	☐ DELFTE	2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP			3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS		Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition
CITY+ST-ZIP TITLE NAME		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME		☐ Change ☐ Addition
STREET ADDRESS		A : 4 : 4 : 4 : 4 : 4 : 4 : 4 : 4 : 4 :	6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Lin Caption 110 07/2Vi) Elevido Statidos Litudia	

4. I bereby 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 suppliemental 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 recover 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 chapped, or on an attachment with an address.

SIGNATURE:

loan 7. () ----

wident 0/2/98 (954)430-8965

FILED

Feb 10 1998 8:00am

Secretary of State