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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M99137 (5)

1. Corporation Name
Byers Party Inc.

Principal Place of Business
1465 NE 121 St.
N. Miami, Fl - 33161

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09-19-1988

2. Principal Place of Business
21 Mary E Byers
Suite, Apt. #, etc.
22 525 NE 19th St.
City & State
23 Ft. Lauderdale, Fl
Zip 24 33305 Country 25 Broward

2a. Mailing Address
26 Mary Byers
Suite, Apt. #, etc.
27 525 NE 19th St.
City & State
28 Ft. Lauderdale, Fl.
Zip 29 33305 Country 30 Broward

4. FEI Number
65-0074071
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
Byers Mary E
525 NE 19th St.
Ft. Lauderdale, Fl 33305

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section(s) 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 Mary E Byers (Signature of New Registered Agent, if changing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Byers Mary E	1.2 NAME	
STREET ADDRESS	525 NE 19th St	1.3 STREET ADDRESS	
CITY-ST-ZIP	Ft Lauderdale, Fl 33305	1.4 CITY-ST-ZIP	
TITLE	VS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Byers, Byron	2.2 NAME	
STREET ADDRESS	14899 NE 18 Ave.	2.3 STREET ADDRESS	
CITY-ST-ZIP	N. Miami, Fl	2.4 CITY-ST-ZIP	
TITLE	T ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	Byers Constance E	3.2 NAME	
STREET ADDRESS	1800 NE 114 St. #307	3.3 STREET ADDRESS	
CITY-ST-ZIP	N. Miami, Fl. 33181	3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	Omit	4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	400002525654
STREET ADDRESS		6.3 STREET ADDRESS	-05/15/98--01080--024
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

14. I 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 report or supplemental 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: Mary E Byers — 4-13-98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)