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CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P25967

(1)

SOS INDUSTRIES, INC.

FILED Jan 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2650 N DIXIE FREEWAY 2650 N DIXIE FREEWAY P O BOX 814 P O BOX 814 DO NOT WRITE IN THIS SPACE NEW SMYRNA BEACH FL 32168 NEW SMYRNA BEACH FL 32168 3. Date Incorporated or Qualified 09/11/1989 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 21 65-0092837 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζìρ Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, X Yes 24 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KANE, WILLIAM B. 2650 N DIXIE FREEWAY 82 Street Address (P.O. Box Number is Not Acceptable) **NEW SMYRNA BEACH FL 32168** 83 84 City 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 of 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 regulred when reinstating) DATE OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE KANE, WILLIAM B. 1.2 NAME NAME 2650 N DIXIE FREEWAY STREET ADDRESS 1.3 STREET ADDRESS NEW SMYRNA BEACH FL CITY-ST-7IP 1.4 CITY - ST-7IP DELETE ☐ Change Additic TITLE 2.1 TITLE TAYLOR, DEBORAH 2.2 NAME NAME 2650 N DIXIE FREEWAY 2.3 STREET ADDRESS STREET ADDRESS NEW SMYRNA BEACH FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition TITLE GREEN, GLEN E. NAME 3.2 NAME 2627 SPRING PARK ROAD STREET ADDRESS 3.3 STREET ADDRESS JACKSONVILLE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TATLE 4.1 TITLE MARTZ, GARY A. NAME 4, 2 NAME 2627 SPRING PARK ROAD STREET ADDRESS 4.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition 5.1 TITLE TITLE BREITWEISER, JILL M 5.2 NAME NAME 2650 N DIXIE FREEWAY 5.3 STREET ADDRESS STREET ADDRESS NEW SMYRNA BCH FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby 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 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 charged, or on an attachment with an address.

SIGNATURE: