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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200009985 (2)

FILED Mar 16 1998 8:00am Secretary of State

FRIEDBERG GROUP, INC. Principal Place of Business Mailing Address C/O GRUBER AND ASSOCIATES, PA 1650 SOUTHEAST 17 STREET 301 FORT LAUDERDALE FL 33316-1735 1400 EDAKLAND PARK BLVD SUITE 107-109 FDLAUDERDALE FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/08/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 1400 EAST ONKLAND! 65-0372993 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be FORT Trust Fund Contribution Added to Fees Ζφ Country 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent Name FRIEDBERG, GARRY C/O GRUBER SASSOCIATES, P.A. Street Address (P.O. Box Number is Not Acceptable) 1650 SOUTHEAST 17TH STREET. SUITE 301 FDLAUDERDALE FL 33316~ 85 Zip Code 333/6:/73 X 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. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. EAST DELETE TITLE 1.1 TITLE FRIEDBERG, GARRY NAME 1.2 NAME 1.3 STREET ADDRESS 1400 EAST DAKLAND DARK BOUL 1400 AKLAND PARK BLVD, STE 107-109 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIF 1.4 CITY - ST - ZIP TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - Z(P DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CHTY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST- ZIP 54 CITY - ST - ZIP TITLE DELETE 61 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP

14. Thereby 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 supplemental annual report is frue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or true is 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, join an attachment with an appears.

SIGNATURE:

1/20/PR

gysnur