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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P9300005618 (2) **DOCUMENT #**

Secretary of State

FILED

May 01 1998 8:00am

PAZAZZ' AND COMPANY, INC. Principal Place of Business Mailing Address 4154 TAMIAMI TRAIL NORTH 4154 TAMIAMI TRAIL NORTH NAPLES FL 3410 NAPLES FL 34103 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/25/1993 2a. Mailing Address Applied For Not Applicable 65-0388894 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Collier 30 8. This corporation owes or has paid the current year Intangible Yes Yes □ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent HANAHAN, SARAH M 4154 TAMIAMI TRAIL NORTH Street Address (P.O. Box Number is Not Acceptable) NAPLES FL 33940 83 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ection 607.0505, Florida Statutes. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS DELETE Change Addition TITLE 1 1 TITLE NAME HANAHAN, SARAH M 1.2 NAME 417 CYPRESS WAY EAST STREET ADDRESS 1.3 STREET ADDRESS NAPLES FL 33942 CITY-51-7IP 1.4 CITY-ST-ZIP DELETE Change TITLE 21 TITLE ☐ Addition HANAHAN, JOHN P 2.2 NAME NAME STREET ADDRESS 417 CYPRESS WAY EAST 2.3 STREET ADDRESS NAPLES FL 33942 CITY-ST-ZIP 2.4 CITY - ST-ZIP DELETE TITLE Addition 31 TITLE HANAHAN, TERRY J 3.2 NAME MAME 180 FURROW FIELD COURT STREET ADORESS 3.3 STREET ADDRESS WINCHESTER VA 22602 3.4. CITY - ST- ZIP CITY - ST - ZIP DELETE Change ■ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

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 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 changed, or on an attachment with an address.

Jarah M. Hanahan 4-22-28 **SIGNATURE**