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 # P93000025511 (5)

BARRY STERNBERG, INC.

Mailing Address		
740 N CASEY K OSPREY FL 334 US		

FILED Mar 27 1998 8:00am Secretary of State



N CASEY KEY RD REY FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/30/1993 2. Principal Place of Business 2a. Mailing Address Applied For 65-0397692 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 Yes ☐ No 25 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 STERNBREG, BARRY 740 N CASEY KEY RD 82 Street Address (P.O. Box Number is Not Acceptable) OSPREY FL 34229-9707 R3 84 City Zip Code

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 tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstalling) DATE OATE						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	IS IN 12	
TITLE	PSD DELE	TE 1.1 TITLE		☐ Change	Addition	
NAME	STERNBERG, BARRY	1.2 NAME				
STREET ADDRESS	740 N CASEY KEY RD	1.3 STREET ADD	PRESS			
CITY-ST-ZIP	OSPREY FL	1.4 CITY - ST - ZII	P .			
TITLE	DELE	TE 2.1 TITLE		Change	☐ Addition	
NAME		2.2 NAME			}	
STREET ADDRESS		2.3 STREET ADD	PRESS			
CITY-ST-ZIP		2. 4 City - St - Zi	IP		i	
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NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADD	PRESS			
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TITLE	☐ DELE	TE 4.1 TITLE		☐ Change	☐ Addition	
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CITY-S1-ZIP		4.4 CHTY-ST-ZIF	Ρ			
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NAME		6.2 NAME			ĺ	
STREET ADDRESS		6.3 STREET ADD	RESS		ļ	
CITY-ST-ZIP		6.4 CITY - ST - ZIF	Р			

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 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 re-lover or trustee eyropy-grape 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 exact ment with an acid ess.

SIGNATURE: