SECOND NOTICE; CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

SIGNATURE:

AMOUNT-21E ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 DEC -4 PM 5: 59 DOCUMENT # P93000028928 (8) 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA ANTON, INC. Principal Place of Business Mailing Address 12505 BOYETTE RD 12505 BOYETTE RD RIVERVIEW FL 33569 RIVERVIEW FL 33569 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/20/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-<u>3272370</u> 21 26 Not Applicable Suite, Apt. #, etc. Suite, Ant. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζìρ Country Zip Country This corporation owes or has paid the current year intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PHAM, ANTON V 12505 BOYETTE RD Street Address (P.O. Box Number is Not Acceptable) RIVERVIEW FL 33569 83 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 familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered egent and title if applicable DATE (2/98)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12, 13. TITLE 1.1 TITLE DELETE Change Addition **CR2E034** PHAM, ANTON VIET QUOC NAME 1.2 NAME 12505 BOYETTE RD STREET ADDRESS 1.3 STREET ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIF 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE __ Change PHAM, ANTHONY VICTOR NAME 2.2 NAME 500002708025 12505 BOYETTE RD 2.3 STREET ADDRESS -12/09/98--01111--008 STREET ADDRESS RIVERVIEW FL 33569 ****150.00 CITY-ST-ZIP 2.4 CITY-ST-ZIP ****150.00 TITLE DELETE 3.1 TITLE Change PHAM, DOAN VAN NAME 3.2 NAME 12505 BOYETTE RD STREET ADDRESS 3.3 STREET ADDRESS RIVERVIEW FL 33569 CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE Change TITLE _ DELETE PHAM, ANTHONY SON HAI 4.2 NAME NAME 17920 BOYETTE RD STREET ADDRESS 4.3 STREET ADDRESS LITHIA FL 33547 4.4 CITY-ST-ZIP CITY-ST-ZIP TITLE 5.1 TITLE DELETE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 149:07(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

To whom it may concern:

CORP ANNUM REPORT. THE FIRST ANNUAL REPORTS
FOR BOTH COMPANIES WERE SENT AND APPARENTLY
YOU HAD ONLY RECIEVED THE REPORT FOR ST. ANTON
CORP. TO CLAREITY THIS MATTER I AM NOW SENDING
THE SECOND ANNUAL REPORT OF \$150.00 FOR ANTONIWE.
I APOLOGIZE FOR ANY INCONVENIENCE ON MY PART.
THANK YOU FOR YOUR TIME AND UNDERSTANDING. IF
THERE IS ANY FURTURE PROBLEMS PLEASE NOTIFY ME
AS SOON AS POSSIBLE. ONCE AGAIN THANK YOU FOR
YOUR ASSITMACE: IN THIS MATTER.

SNCERELY YOURS,