FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 ーフ /So 의 FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Jun 05 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT # P93000034179** 1. Corporation Name EMERALD COAST INTERIORS, INC. Principal Place of Business Mailing Address 4459 COASTAL LANE 4459 COASTAL LANE DO NOT WRITE IN THIS SPACE PACE, FL 32571 PACE, FL 32571 3. Date incorporated or Qualified 05/07/1993 4. FEI Number 59-3179578 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COOK, ROBERT D. Street Address (P.O. Box Number is Not Acceptable) 82 4047 MOONRAKER DRIVE 83 PENSACOLA, FL 32507 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 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 required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. CR2E034 (10/97) PRESIDENT TITLE DELETE 1.1 TITLE Change Addition COOK, ROBERT D. NAME 1.2 NAME STREET ADDRESS 4047 MOONRAKER DRIVE 1.3 STREET ADDRESS PENSACOLA, FL 32507 SECRETARY/TREAS CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE 2.1 TITLE Change Addition MARSHALL, JEFFREY NAME 2.2 NAME STREET ADDRESS 1600 SW 4TH STREET 2.3 STREET ADDRESS CITY - ST - ZIP FT. LAUDERDALE, FL 33312 2.4 CITY - ST - ZIP DIRECTOR TITLE 3.1 TITLE Change Addition MARSHALL, CHARLES E. JR. 1755 SE 9TH STREET NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS FT. LAUDERDALE, FL 33316 OTY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** ZTY - ST - ZIP 5.4 CITY - ST - ZIP TITLE 6.1 TITLE DELETE NAME 6.2 NAME STREET ADDRESS -06/08/98--01006--003 6.3 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 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. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

STF FL32381F.1