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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

P93000034340 (8) DOCUMENT #

ROB'S TRIM, INC.

FILED Feb 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 36531 ORANGE ST 36531 ORANGE ST LEESBURG FL 34788 LEESBURG FL 34788 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/07/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3182672 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country ZΙρ Country 8. This corporation owes or has paid the current year Intangible Yes ∏ No 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GRIGSBY, ROBERT C JR 36531 ORANGE ST Street Address (P.O. Box Number is Not Acceptable) LEESBURG FL 34788 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ■ DELETE Change TITLE 1.1 TITLE GRIGSBY, ROBERT C JR 1.2 NAME NAME CR2E034 36531 ORANGE ST 1.3 STREET ADDRESS STREET ADDRESS LEESBURG FL 34788 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Addition: 2.1 TITLE Change TITLE GRIGSBY, ROBERT C JR NAME 2.2 NAME 3651 ORANGE ST STREET ADDRESS 2.3 STREET ADDRESS LEESBURG FL 34788 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change ___ Addition TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5 1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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: RILL ST. K. R. L. P. EG.

352787-9840