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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000042366 (3)

PRUDENTIAL FLAMERS CORP.

FILED Feb 18 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 500 SOUTH 3RD ST. 500 SOUTH 3RD ST. DO NOT WRITE IN THIS SPACE JACKSONVILLE BCH FL 32250 JACKSONVILLE BOH FL 32250 3. Date incorporated or Qualified 06/09/1993 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 3RDST 59-3188051 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired NONE Fee Required 27 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζiρ Country Country Zip This corporation owes or has paid the current year Intangible M Yes □ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DARABI, FARZIN Name 500 SOUTH 3RD ST. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 201 83 JACKSONVILLE BCH FL 32250 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 little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE DARABI, FARZIN NAME 1.2 NAME CR2E034 **159 ELEVENTH ST** STREET ADDRESS 1.3 STREET ADDRESS ATLANTIC BCH FL CITY-ST-ZIP 1,4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DARABI, FRANK NAME 2.2 NAME 730 N WALDO RD SUITE A STREET ADDRESS 2.3 STREET ADDRESS **GAINESVILLE FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ... Addition 3 1 TITLE TITLE PARTOW, RAMIN NAME 3.2 NAME 335 11TH STREET STREET ADDRESS 3.3 STREET ADDRESS ATLANTIC BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 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 6.1 TITLE TITLE NAME 6.2 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 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 or an ayachgoon with an address.

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