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

P93000058558 (6) DOCUMENT #

CLARE AVENUE INVESTMENT CORP.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1615 CLARE AVE. 1615 CLARE AVE WEST PALM BEACH FL 33405 WEST PALM BEACH FL 33405 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/18/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For **NOT APPLICABLE** Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, 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 П 23 28 Trust Fund Contribution 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 25 29 30 Personal Property Tax due June 30. ☐ Yes g. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 81 Name MURPHY, M E 1615 CLARE AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **WEST PALM BEACH FL 33405** 83 Zip Code 84 City 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, typod or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 12 13. DELETE 1.1 TITLE __ Change ___ Addition TITLE MURPHY, M E NAME 1.2 NAME 1615 CLARE AVE. STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP ☐ DLLETE ☐ Change ■ Addition TITLE 6.1 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 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 trustoe 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.

Not. M. M.

MARTINE MULPILL

4/29/98

561-655-3634 x118