FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

The same

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000081399 (6) DOCUMENT #

JONCZAK & ASSOCIATES, INC.

Principal Place of Business Mailing Address 8222 S E ROYAL STREET 8222 S E ROYAL STREET HOBE SOUND FL 33455 HOBE SOUND FL 33455 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable 65-0454303 Suite, Apt. #. etc. Suite, Apt. #, etc. \$8,75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Žip Country Ζip Country 8. This corporation owes or has paid the current year Intangible Yes 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAJUCCI, JOHN E C/O JOHN E MAIUCCI ATTORNEY AT LAW Street Address (P.O. Box Number is Not Acceptable) 55 E OSCEOLA STREET SUITE 200 STUART FL 34994 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 13. DELETE TITLE 1.1 TOTLE Change Addition JONCZAK, THEODORE NAME 12 NAME STREET ADDRESS **8222 SE ROYAL STREET** 1.3 STREET ADDRESS **HOBE SOUND FL 33455** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME JONCZAK, HAZEL 2.2 NAME **8222 SE ROYAL STREET** STREET ADDRESS 2.3 STREET ADDRESS **HOBE SOUND FL 33455** CITY-ST-ZIP 2.4 CITY-\$1-ZIP DELETE TITLE ☐ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE Addition TITLE 5.1 HILE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

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 eath; 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.

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP