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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT #

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

P94000008141 (1) REGAL BEAGLE, INC.

Principal Place of Business Mailing Address 378 WESTFORD CIR 378 WESTFORD CIR PALM HARBOR FL 34683 PALM HARBOR FL 34683 2. Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. Suite, Apt. #, etc.

59-3301054 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Yes 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 Name DILLMAN, BERNARD F 378 WESTFORD CIR Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 34683 83

11. Pursuant to the provisions of Soctions 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

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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 life if applicable	(NOTE: E	Registered Agent signature r	required when reinstating) DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	☐ Change ☐ Addi
NAME	DILLMAN, BERNARD F		1.2 NAME	
STREET ADDRESS	378 WESTFORD CIR		1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34683		14 CITY-ST-ZIP	
TITLE	D	DELETE	2 1 TITLE	☐ Change ☐ Addi
NAME	DILLMAN, RHONDA		2.2 NAME	
STREET ADDRESS	378 WESTFORD CIR		2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL 34683		2.4 CITY-ST-ZIP	;
TITLE		DELETE	3.1 TITLE	Change Addi
NAME			3.2 NAME	
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NAME			4. 2 NAME	
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NAME :			5.2 NAME	
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CITY-ST-ZIP			54 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	☐ Change ☐ Addi
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
000/ 57 70			A LOUTY OF THE	

14. Thereby 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 attach then with an address.

SIGNATURE:

4-23-88

FILED

May 06 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

Applied For

85

Zip Code

3. Date Incorporated or Qualified

01/24/1994