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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000012567 (1)

FAN LADY & LIGHTING, INC.

Malling Address

FILED
Mar 19 1998 8:00am
Secretary of State



3579 ACCESS RD S 3579 ACCESS RD S SUITE E SHITE F DO NOT WRITE IN THIS SPACE ENGLEWOOD FL 34224 ENGLEWOOD FL 34224 3. Date Incorporated or Qualified 03/01/1994 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0472149 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 **Trust Fund Contribution** Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. 29 30 ☑ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MAGUIRE, PHYLLIS 3579 ACCESS RD S Street Address (P.O. Box Number is Not Acceptable) 82 SUITE E 83 ENGLEWOOD FL 34224 City Zip Code 65 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 profind name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition NAME MAGUIRE, PHYLLIS V 1.2 NAME STREET ADDRESS 5441 GILLOT BLVD 1.3 STREET ADDRESS PT CHARLOTTE FL CITY-ST-ZIP 1.4 CITY - ST-ZIP TITLE DELETE 21 TITLE Change Addition NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 31 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TiTLE Change Addition NAME 6 2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-7IP 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 on an attachment with an address.

SIGNATURE: Phyllis J. Manuire 8/15/08 941-475-1901

CR2E034 (10/97