FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P94000043830 (6) DOCUMENT # Corporation Name LARGO HOLDING COMPANY, INC. Principal Place of Business Mailing Address S PELICAN DR. 2021 UNION ST. OCEAN REEF CLUB **SUITE 1150** KEY LARGO FL 33037 MONTREAL OC H3A259 3. Date Incorporated or Qualified 3a. Date of Last Report IB CANALA 06/10/1994 08/14/1995 2. Principal Place of Busines 2a. Mailing Address 4. FEI Number 65-0497261 Applied For Pelican DR 26 2021 UNION ST Sou, APPENDE OR PHOSIZ Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired COCEAN REEF CLUB 27 SUITE Fee Required ARGO, PL 28 HONTRIAL 6. Election Campaign Financing \$5.00 May Be Q c 23 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 7 25 B.U.SA 29 H3A 39. Name and Address of Current Registered Agent CANADA Yes No Florida Statutes 10. Name and Address of New Registered Agent Name FRANKLIN H. CAPLAN Street Address (P.O. Box Number is Not Acceptable) 82 BERGER & DAVIS, PA 83 100 N.E. THIRD AVENUE, SUITE 4009 FORT LAUDERDALE FL 33301 84 City 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the ob/gations of, Section 607,0505, Florida Statutes. SIGNATŪRE Signature, typed or printed has a of registerial agent and the if applicable (NOTE: Flogratered Agreit signature required when remaratings CR2E034 (12/95) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. THILE DEL ET E 1. 1 TITLE Change Addit on NAME **RAYMOND DAVID** 1.2 NAME 2021 UNION ST. SUITE 1150 STREET ADDRESS 1.3 STREET ADDRESS MONTREAL QC CITY - ST - ZIP 14 CHY-51-ZIP TITLE ["] DELETE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 C/TY-ST-Z/P TITLE DELETE 3 1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CiTY - ST - ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4 1 THE 500001770845 -04/05/96--01050--011 Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS ***200.00 CHTY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 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 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 CITY - ST-ZIP formation sopolied with this fring is voluntarily indicated on this annual report or supplemental or director of this apporation or the receiver or the second or the receiver or the second or the receiver or the second or the mished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further mual report is true and accurate and that my signature shall have the same legal effect as if made under ee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the certify that the informatio path; that I am an office appears in Block 12 or

SIGNATURE:

ATORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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