SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 NOV 19 AM 11: 47 DOCUMENT # P94000075320 SECRETARY OF STATE TALLAHASSEE. FLORIDA Musclehead Inc Principal Place of Business 1061A WBrow Blud 1061 A W Broward Blud Plantation FL 33311 3. Date Incorporated or Dualified DO NOT WRITE IN THIS SPACE Plantation FL 33311 10-10-94 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 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 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No Zio Country Country Zip 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Glenn K Powell 1290 Camella Lane Weston FL 33326 Street Address (P.O. Box Number is Not Acceptable) 82 83 City 84 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. I hereby accept the appointment as registered agent. I may must write and accept the collegations of the corporation of the corporation of the corporation of the corporation. (NOTE Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE resident lenn Pousell DELETE ☐ Change ☐ Addition 1.1 TOTLE NAME 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS \*\*\*\*150.00 CITY-ST-ZIP 1.4 CITY-ST-ZIP ☐ Change ☐ Addition TITLE 2.1 THT E ice President 2.2 NAME NAME paniel STREET ADDRESS 2.3 STREET ADDRESS CUTY-SI-ZIP 2. 4 CITY-ST-ZIP TITLE Change ☐ Addition 3.1 TITLE NE'S 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4, CITY - ST - ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETÉ Change Addition TITLE 5.1 TITLE NAME 5 2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY-ST-ZIP DELFTE TITLE 6 1 TITLE ☐ Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

the information

14. I hereby certify that the information supplied with this filling 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 unear paths, that I am a 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 entachment with an address.

CITY-ST-ZIP

SIGNATURE:



MEMBERS OF AMERICAN AND FLORIDA INSTITUTES OF CERTIFIED PUBLIC ACCOUNTANTS

JOHN F. KELLY, C.P.A. ELIZABETĤ M. KELLY, C.P.A. FT. LAUDERDALE (954) 561-0557 PALM BEACH (561) 368-0557 FAX (954) 561-2749

PLAZA 3000, BUILDING 11 3020 NORTH FEDERAL HIGHWAY FORT LAUDERDALE, FLORIDA 33306

November 10, 1998

Florida Secretary of State Division Of Corporations PO Box 6327 Tallahassee, FL 32314

Ref: Musclehead Inc

Dear Sirs:

Enclosed is a check for \$150.00 to renew the above corporation for 1998. Please note that the client never received the renewal for 1998. As you can see, this corporation has been in existence since 1994 and all renewals have been made timely. Thank you for your understanding.

Sincerely yours,

Elizabeth M Kelly CPA