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

FILED
Jun 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P 94000079096

1. Corporation Name

PEGASUS INTERNATIONAL INC.

Principal Place of Business	Mailing Address
941 BUNKER VIEW DR. APOLLO BEACH, FL 33572 U.S.	941 BUNKER VIEW DR. APOLLO BEACH FL 33572 U.S.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt #, etc. 22	Suite, Apt #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 10/26/94

4. FEI Number: 59-3281380 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

ROBERTS, HARRY E.
941 BUNKER VIEW DR.
APOLLO BEACH, FL 33572

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D. P.	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	ROBERTS, HARRY E.		1.2 NAME	
STREET ADDRESS	941 BUNKER VIEW DR.		1.3 STREET ADDRESS	
CITY-ST-ZIP	APOLLO BEACH FL 33572		1.4 CITY-ST-ZIP	
TITLE	DVP	☐ DELETE	2.1 TITLE	DVP ☐ Change ☐ Addition
NAME	ROBERTS, JEFFRY H.		2.2 NAME	ROBERTS, JEFFRY H
STREET ADDRESS	941 BUNKER VIEW DR		2.3 STREET ADDRESS	10416 BLOOMINGDALE AVE.
CITY-ST-ZIP	APOLLO BEACH FL 33572		2.4 CITY-ST-ZIP	RIVERVIEW FL 33569
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 TITLE	☐ Change ☐ 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	300002563785 -06/18/98--01014--050 ***165.00
STREET ADDRESS			6.3 STREET ADDRESS	PE 6-17
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

CR2E034 (10/97)

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: Harry E. Roberts HARRY E. ROBERTS 6/12/98 813 645-1932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #