FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # P95000024807 (6)

1. Corporation Name
THE KOSMAS GROUP, INC.

Principal Place of Business
751 THIRD AVE
NEW SMYRNA BEACH FL 32169

Mailing Address
751 THIRD AVE
NEW SMYRNA BEACH FL 32169

3. Date Incorporated or Qualified: 03/28/1995
3a. Date of Last Report:

4. FEI Number: 59-3321096 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc.
27
City & State
28
Zip 29 Country 30

9. Name and Address of Current Registered Agent

KOSMAS, STEVEN P
751 THIRD AVE
NEW SMYRNA BEACH FL 32169

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 ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	KOSMAS, STEVEN P	
STREET ADDRESS	751 THIRD AVE	
CITY-ST-ZIP	NEW SMYRNA BEACH FL 32169	
TITLE	D	☐ DELETE
NAME	KOSMAS, PAUL	
STREET ADDRESS	751 THIRD AVE	
CITY-ST-ZIP	NEW SMYRNA BEACH FL 32169	
TITLE	D	☐ DELETE
NAME	KOSMAS, NICHOLAS G	
STREET ADDRESS	751 THIRD AVE	
CITY-ST-ZIP	NEW SMYRNA BEACH FL 32169	
TITLE	D	☐ DELETE
NAME	GORDY, HAROLD B JR	
STREET ADDRESS	5200B COASTAL HWY	
CITY-ST-ZIP	OCEAN CITY MD 21842	
TITLE	D	☐ DELETE
NAME	CAIRO, HENRY	
STREET ADDRESS	111 N ORANGE AVE	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	700001864357	☐ Change ☐ Addition
5.2 NAME	-06/18/96--01008--014	
5.3 STREET ADDRESS	***200.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS	5-1-96	
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X Nick Kosmas — 4/30/96 — 904-428-7590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)