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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000028222 (4)

VERDE INDUSTRIES, INC.

FILED Feb 03 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4723 W. ATLANTIC AVE 4723 W. ATLANTIC AVE BLDG A STE 20 BLDG A STE 20 DO NOT WRITE IN THIS SPACE DELRAY BEACH FL 33445 DELRAY BEACH FL 33445 3. Date Incorporated or Qualified 04/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0573513 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BERGER, BRUCE 4723 W. ATLANTIC AVE 82 Street Address (P.O. Box Number is Not Acceptable) BLDG A STE 20 83 DELRAY BEACH FL 33445 84 City 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. Bruce Berger; President 01/27/98 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition BERGER, BRUCE M 1.2 NAME **CR2E034** 4723 W. ATLANTIC AVE., BLDG A STE 20 STREET ADDRESS 1.3 STREET ADDRESS **DELRAY BEACH FL 33445** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 3.1 TITLE Addition TITLE 3 2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change ___ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST-ZIP DELETE Channe Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE _ Change Addition 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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 for on an attachment with an address.

SIGNATURE:

W MILLURE REQUIRED

01/27/98

(561)498-4043