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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00				
PROFIT PROPORATION ANNUAL REPORT PROFIT FLORIDA DEPART Katherine Secretary	e Harris of State	FILED		
1999 DIVISION OF CORPORATIONS				
DOCUMENT # P 950000 3001 1		99 JAN 15 PM 4: 06		
DOCUMENT # P950000 36017 1. Corporation Name Conquerer Perforense Tool Corep.		SECRETARY OF STATE IALLAHASSEE. FLORIDA		
Principal Place of Business Mailing Address				
2400 W. Copans Rd Some		DO NOT INDITE IN THIS COAST		
Pompono Beach FL 33069		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifeet 5 3 Company of the		
2. Principal Place of Business 2a. Mailing Address		4. FE Number 06 50 47 2 Applied For		
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional		
22 27 City & State City & State		Fee Required 6. Election Campaign Financing \$5.00 May Be		
23 Fom pano Beach F 128 Zip Country	Country	Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible		
24 3 3 0 6 9 25 29 34	- '	Personal Property Tax.		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Acrola Galdman 81 Name and Address of New Registered Agent S. Zucker				
22567 CARAVELLE CIR BZ Street Address (P.O. Box Number is Not Acceptable) CIR				
Bocar Raton, FL 33433				
10 Ca Raton FL 85 Zip Code 33				
11. Pursuant to the provisions of Sections 07/050/and 607.1508, Florits Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment as registered agent. I am familiar with sorting accept the appointment accept the appointment as registered agent. I am familiar with sorting accept the appointment accept the				
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STREET ADDRESS 22567 CALAU elle Cir	1.3 STREET ADDRESS			
TITLE DO DELETE	1.4 City-ST-ZIP 2.1 TitlE	↑ Change ☐ Addition		
NAME Hichael Zuckere	2.2 NAME	no cleare		
CITY-ST-ZIP BOCK RATE FL 33 433	2.3 STREET ADDRESS 2.4 City-St-ZiP	·		
TITLE DANS DOMEST	3.1 TITLE 3.2 NAME	☐ Change ☐ Addition		
STREET ADDRESS 424 Hendrix are	3.3 STREET ADDRESS	1000027158517		
CITY-ST-ZIP FT Lauderdole, FC 13 330)	3.4. CITY-ST-ZIP	-12/18/3801053005 *****52.50 (******52.50)		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplies wat the Zing does not qualify for the	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6 EXEMPTION STATED In Se	100027158517 -01/15/9901002003 *****97.50 ******97.50 Change Addition ction 119.07(3)(i) Florida Statutes. I further certify that the information		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplies with the Stand does not qualify for the indicated on this annual report or supplies annual report is true-supplies and accurate officer or director of the corporation. He seeked or trustee impowered to execute.	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.2 Exemption stated in See and that my signature soute this report as require her like empowered. Age 1.5. Z	100027158517 -01/15/9901002003 *****97.50 ******97.50 Change Addition ction 119.07(3)(i) Florida Statutes. I further certify that the information		

Conquerer Performance Tool Corp. 2400 W. Copans Road # 8 Pompano Beach, FL 33069

Phone: 954-917-9277 Fax: 954-917-9093

December 15, 1998

Division Of Corporation Amendment Section P. O. Box 6327 Tallahassee, FL 32314

To whom it may concern;

Enclosed please find the change in the ownership of the corporation and the amendment for same. A check for the changes for \$52.50 is also enclosed.

If you have any question please call me at 954-917-9277.

Very truly yours,

1-010-010-2-7-1-5-0-5-1-005 -12/18/98--01053--005 *****52.50--******52.50

Aichael S. Zucker

President,

pa50000 Mersh