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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000041669 (9)

NOAH'S ARK TENTS, INC.

Mailing Address Principal Place of Business 14300 SW 88 AVE 14300 SW 88 AVE DO NOT WRITE IN THIS SPACE MIAMI FL 33176 MIAMI FL 33176 3. Date Incorporated or Qualified 05/26/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 14136 S.W. 88 AUE. 14136 S.W. 88 AVE. 65-0587924 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FL MIAMI MIAM Trust Fund Contribution Added to Fees 28 Country
U.S.A. 33176 Country 8. This corporation owes or has paid the current year Intangible U.S.A. Personal Property Tax due June 30. X Yes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MARTINEZ, BENJAMIN MARTINE2 BENJAMIN 14300 SW 88 AVE Street Address (P.O. Box Number is Not Acceptable) 82 83 **MIAMI FL 33176** 84 City MIAMI 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 objugations of, Section 607.0505, Florida Statutes. BENJAMIN MARTINEZ PRESIDENT nramin SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. Change DELETE TITLE 11 TITLE NAME MARTINEZ, BENJAMIN 12 NAME 9815 SW 222 ST 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33190 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE STD 21 TITLE MARTINEZ, FRANCISCO 2.2 NAME 8670 SW 212 ST APT 201 2.3 STREET ADDRESS STREET ADORESS CITY-SY-ZIP **MIAMI FL 33189** 2.4 CITY-ST-ZIP Addition DELETE TT Change 3.1 TIFLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE MAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TITLE ☐ Change ☐ Addition TITLE NAME 6.2 NAME

Block 12 or Block 13 it changed or or arranged ment with an attendess.

FRANCISCO MARTINEZ 4/28/98 305-596-8528

6.3 STREET ADDRESS

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 supplieriental 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