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

PROFIT CORPORATION ANNUAL REPORT 1998 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS Apr 29 1998 8:00am Secretary of State

DOCUMENT # P95000046691 (8) **COLKAR CORPORATION** Principal Place of Business Mailing Address 8622 N.W. 48TH STREET % TRI STAR ACCOUNTING **CORAL SPRINGS FL 33067** 3200 N. MILITARY TRAIL. #201 DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33431** 3. Date Incorporated or Qualified 06/12/1995 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 65-0635985 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5 Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name LYNCH, COLLIN G 6622 N.W. 48TH ST. Street Address (P.O. Box Number is Not Acceptable) **CORAL SPRINGS FL 33067** 83 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. 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. DELETE 1.1 TITLE Change ___ Addition TITLE LYNCH, COLLIN G NAME 1.2 NAME 6622 N.W. 48TH ST. STREET ANABESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33067 CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE LYNCH, KAREN E NAME 2.2 NAME 6622 N.W. 48TH ST. STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS FL 33067 CITY-ST-7IP 2. 4 CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - 2IP CITY-ST-ZIF DELETE 5.1 TITLE ☐ Change Addition TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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-dip 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 changes, or on an all achieves.

SIGNATURE:

(COLLIN G. LYNCH)

04/10/98

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FILED

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