FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

FILED
Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P95000046952 (4)**

1. Corporation Name
SUSA ENTERPRISES, INC.

Principal Place of Business
11 LAKESHORE DRIVE
KEY LARGO FL 33037
US

Mailing Address
11 LAKESHORE DRIVE
KEY LARGO GL 33037-2512
US

3. Date Incorporated or Qualified: **06/16/1995**
3a. Date of Last Report: **04/16/1996**

4. FEI Number: **65-0591905** — 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 98 SE 6th Ave
Suite, Apt. #, etc.
22 #2
City & State
23 DelRay Beach FL
Zip 24 33483 Country 25 P.Bch

2a. Mailing Address
26 98 SE 6th AVE
Suite, Apt. #, etc.
27 #2
City & State
28 DelRay Bch FL
Zip 29 33483 Country 30 P.B Co.

9. Name and Address of Current Registered Agent
HOGAN, SUSAN M
11 LAKESHORE DRIVE
KEY LARGO FL 33037

10. Name and Address of New Registered Agent
81 Name SUSAN HOGAN
82 Street Address (P.O. Box Number is Not Acceptable)
83 98 SE 6th Ave #2
84 City DelRay Bch FL 85 Zip Code 33483

11. Pursuant to the provisions of Sections 607.0505 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: Susan Hogan — (NOTE: Registered Agent signature required when reinstating) — DATE: 3/17/97

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
PVST	HOGAN, SUSAN	11 LAKESHORE DRIVE	KEY LARGO FL	☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE
				☐ DELETE

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		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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, or in an attachment with an address.

SIGNATURE: Susan Hogan SUSAN HOGAN 3/17/97 561-266-9120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #