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Apr 10 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000055617 (1)

1. Corporation Name

PRIME INFORMATION BROKERS, INC.

Principal Place of Business

Mailing Address

P. O. BOX 4416
DEERFIELD BEACH FL 33442-4416
US

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DEERFIELD BEACH FL 33442-4416
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/17/1995

4. FEI Number

65-0607210

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 P.O. Box 3028

Suite, Apt. #, etc.

22 City & State

23 Boynton Beach, FL

24 Zip 33424

25 U.S.A.

2a. Mailing Address

26 P.O. Box 3028

Suite, Apt. #, etc.

27 City & State

28 Boynton Beach, FL

29 Zip 33424

30 U.S.A.

9. Name and Address of Current Registered Agent

ERICA J. SCARPATI
627 ANDERSON CIRCLE, APT. 206
~~APT 202~~
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name Erica J. Scarpati
82 Street Address (P.O. Box Number is Not Acceptable)
181 Heming Way
83
84 City Boynton Beach FL 85 Zip Code 33426

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 Erica J. Scarpati Erica J. Scarpati

4-5-98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME ARNOLD J. SCARPATI
STREET ADDRESS 627 ANDERSON CIRCLE, APT. 206
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Arnold J. Scarpati
1.3 STREET ADDRESS 181 Heming Way
1.4 CITY-ST-ZIP Boynton Beach, FL 33426

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

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, or on an attachment with an address.

SIGNATURE Arnold J. Scarpati 4/5/98 561-740-9040

CR2E034 (10/97)