FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P95000069578 (9) LUCKY LADIES, INC. Principal Place of Business Mailing Address 1026 EAST GAUCHO CIRCLE 1026 EAST GAUCHO CIRCLE **DELTONA FL 32725 DELTONA FL 32725** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/05/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 21 26 59-3363302 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name FARNSWORTH, BARBARA A 1026 EAST GAUCHO CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) **DELTONA FL 32725** 83 84 City 85 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. Barbara +ARNSWORTH 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change TITLE DELETE 1.1 TITLE Addition DAVIS, CAROLYN S NAME 1.2 NAME STREET ADDRESS 1026 EAST GAUCHO CIRCLE 1.3 STREET ADDRESS **DELTONA FL 32725** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 2.1 TITLE OLIVER, W. JEAN NAME 2.2 NAME 190 APPLE DRIVE STREET ADDRESS 2.3 STREET ADDRESS **GREENCASTLE PA 17225** CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Addition Change TITLE 3.1 TITLE WISDOM, RACHAEL 3.2 NAME NAME **16 OAKLAND AVENUE** STREET ADDRESS 3.3 STREET ADDRESS CENTRAL ISUP NY 11722 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition TITLE 4.1 TITLE Change FARNSWORTH, BARBARA NAME 4. 2 NAME 1026 EAST GAUCHO CIRCLE STREET ADDRESS 4.3 STREET ADDRESS DELTONA FL 32725 CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP

14. Thereby 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.

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

BAKBARU FARNSWORTH

DELETE

3/19/98

407-860-6200

Change

Addition