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

Mailing Address

STE 202

US

1375 JACKSON ST

2a. Mailing Address

FORT MYERS FL 33901

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

1375 JACKSON ST

FORT MYERS FL 33901

2. Principal Place of Business

STE 202



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000071676 (7)

STEVEN P. KUSHNER, P.A.

21 26 Not Applicable 65-0610644 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No 24 30 Personal Property Tax due June 30. 25 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KUSHNER, STEVEN P 7060 HENDRY CREEK DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33908 63 84 City 65 Zip Code FL 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 607.0506, Florida Statutes. SIGNATURE Signature typed or printed name of registered agent and title. I applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition TITLE 1.1 TITLE KUSHNER, STEVEN P NAME 12 NAME 7060 HENDRY CREEK DRIVE STREET ADDRESS 1.3 STREET ADDRESS FORT MYERS FL 33908 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change Addition 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE ☐ Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 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 of 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.

NES.

941.330.000

FILED

Jan 26 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/15/1995

CR2E034 (10/97

Applied For