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PROFIT CORPORATION

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Feb 10 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P9600000743 (0)

FILED

DOCUMENT # CORPORATE SEARCH, INC. Principal Place of Business Mailing Address 20298 OCEAN KEY DRIVE 20298 OCEAN KEY DRIVE **BOCA RATON FL 33498 BOCA RATION FL 33498** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0650307 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zm 8. This corporation owes or has paid the current year Intangible 24 Yes Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HERMAN, HARRIET 20298 OCEAN KEY DR 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33498** 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 Statutes, the above-named 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 (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ☐ Addition TITLE 1.1 TITLE HERMAN, HARRIET NAME 1.2 NAME 20298 OCEAN KEY DRIVE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33498** CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Addition TLE 21 TITLE 2.2 NAME 2.3 STREET ADDRESS TET ADDRESS 2.4 CITY - ST - ZIP DELETE ☐ Change Addition 3.1 T(T) E 32 NAME 3 3 STREET ADDRESS ADDRESS 3 4. CITY-ST-ZIP i - ZIP DELETE Change Addition 41 TITLE 4. 2 NAME DDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP ZIP DELETE Addition 51 TILLE 5.2 NAME ODMESS 5.3 STREET ADDRESS - ZIP 5.4 CITY-ST-ZIP DELETE Change __ Addition 6.1 TITLE 6.2 NAME 6 3 STREET ADDRESS ADDRESS 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 recover 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 altrement with an address