## FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 17 1998 8:00am PROFIT CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P96 00000 2885 munday Export, Inc. 1318 Lafayette St Cape Coral, FL 33904 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/05/96 4. FEI Number 65-0635179 2. Principal Place of Business 28. Marting Address 26 5117 Castello Dr Applied For 21 25810 Creek Bench Dr Not Applicable Suite, Apt. #, etc \$8.75 Additional П 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Blair, Heide mburn, James 1420; SE 3rd St Cape (comb., FL 33990 82 83 FL 85 Zip Code 3 1509 and 607.1508. Florida Statutes, the above-named corporation's submits this statement for the purpose of changing its registered transfer of fortiga. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered registered specific production of the composition of the corporation of the composition o Pursuant to the provisions of Sections 607.0503 and 607 office or registered agent, or both, in the State of Joriga agent. Lam familiar with, and accept the obligations of S. MBURN OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 11 TITLE ☐ Change ☐ Addition Husner, Josef 25810 Creek Bend Dr 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS Bonita Springs, FL 34134 CITY - ST - ZIP 14 O(TY - S1 - ZIP DELETE TITLE 2 1 11TLE Change Addition NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CiTY - ST - ZIP DELETE THLE 3 1 TITLE Change ■ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-7IP TITLE DELETE 4 1 TITLE Change Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-7IP ☐ DELETE TITLE 5 1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

6.4 CITY - ST - 7IP 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 supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under each; that I am an officer or director of the corporation of fire received 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

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

DELFTE

1000024601<sup>4</sup>°1°° -03/18/98--01003--011 \*\*\*150.00

941-649-1152