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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



TLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 21 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600008112 (0)

MAS HOLDING COMPANY, INC.

Principal Place of Business Mailing Address 15151 N.W. 99TH ST. 15151 N.W. 99TH ST. STE B STE B DO NOT WRITE IN THIS SPACE ALACHUA FL 32615 ALACHUA FL 32615 3. Date Incorporated or Qualified 01/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3358013 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 24 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PALMETTO CHARTER SERVICE, INC. 150 MAGNOLIA AVE. 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BEACH FL 32115-2491 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NO11 Registered Agent signature required when reinstating) Signature: typed or prefest name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE Change 1.1 THE NAME SINGER, MICHAEL A 12 NAME 15151 NW 99TH ST., SUITE B STREET ADDRESS 13 STREET ADDRESS ALACHUA FL 32615 CITY-\$T-ZIP 1.4 CiTY - ST - ZiP DETETE TITLE 21 1111.6 Change ■ Addition **B**URNS, TERRY R NAME 2.2 NAME 15151 N.W. 99TH ST., STE. B STREET ADDRESS 2.3 STREET ADDRESS **A**LACHUA FL 32615 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE 3.1 THLE Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DECETE TITLE 4.1 TITLE ☐ Change ■ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - 7(P DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City - St - 7IP DELETE Addition TITLE 6.1 1011 8

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 suppliemental 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 trusted 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.

6.3 STREET ADDRESS 6.4 City - St - ZIP

6.2 NAME