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PROFIT
CORPORATION
ANNUAL REPORT

1998

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000010928 (5)

SCHULTZ & SCHULTZ SALES, INC.

Principal Place of Business Mailing Address 2338 IMMOKALEE ROAD STE 106 2338 IMMOKALEE ROAD STE 106 NAPLES FL 34110-1445 NAPLES FL 33942 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/31/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 144 NERON AVE 164 HERON AVE 65-0649395 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 NAPLES 23 Trust Fund Contribution Added to Fees 28 Zip Country 8. This corporation owes or has paid the current year Intangible 29 30 Personal Property Tax due June 30. Yes Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHULTZ, GARY 2338 IMMOKALEE ROAD STE 106 Street Address (P.O. Box Number is Not Acceptable) 82 NAPLES FL 34110 83 84 Zip Code 34/08 MAPIES 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. Signature, typed or printed name of registered agent and tipe if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition NAME SCHULTZ, GARY 1.2 NAME STREET ADDRESS 2338 IMMOKALEE ROAD STE 106 1.3 STREET ADDRESS 164 HEROD AVE NAPLES FL NAPLES, FL 34108 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change ■ DELETE Addition TITLE 2.1 TITLE VSTD **SCHULTZ, TERRI** NAME 2.2 NAME 164 HERON AUC 2338 IMMOKALEE ROAD STE 106 2.3 STREET ADDRESS STREET ADDRESS NAPLES, FL 34108 NAPLES FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE

6.2 NAME

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 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 ecceivor 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.

6.3 STREET ADDRESS

CIGNATURE (DUME) DAME IL TERRI SCHOLTZ

4/2-16x (941) 587-1586

FILED

May 06 1998 8:00am

Secretary of State