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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000029677

Corporation Name

CRITICAL MASS, INC.

FILED May 01, 1999 8:00 am Secretary of State

05-01-1999 90090 018 ***150.00



Principal Place of Business Mailing Address 121 BEVERLY ROAD WEST 121 BEVERLY ROAD WEST JUPITER FL 33469 JUPITER FL 33469 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 04/03/1996 Applied For 4. FEI Number 2a, Mailing Address 2. Principal Place of Business Not Applicable 335 65-0654601 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 Country 8. This corporation owes the current year Intangible Zio **V5** A Personal Property Tax. 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KELLY, THOMAS J Street Address (P.O. Box Number is Not Acceptable) 121 W. BEVERLY ROAD JUPITER FL 33465 83 85 Zip Code 84 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE 1.1 TITLE TITLE 12 NAME KELLY, THOMAS J NAME 121 BEVERLY ROAD WEST 1.3 STREET ADDRESS STREET ADDRESS JUPITER FL 33469 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP . Addition ☐ Change ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF ☐ Addition ☐ Change DELETE 4.1 TITLE TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change □ DELETE 5.1 TITLE ☐ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition 6.1 TITLE ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

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 of 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 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 for on an attachment with an address, with all other like empowered.

SIGNATURE:

4/27/99

748-060/

CR2E034 (11/98)