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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000030591 (7)

MARFLO PRODUCTION ENTERPRISES, INC.

FILED Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 3000 N. OCEAN DRIVE 3000 N. OCEAN DRIVE SHITE 12-D SUITE 12-D DO NOT WRITE IN THIS SPACE SINGER ISLAND FL 33404 SINGER ISLAND FL 33404 3. Date Incorporated or Qualified 04/09/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 21 26 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 23 Trust Fund Contribution Added to Fees 28 Zip Country Country Z_{1D} 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WRIGHT, FLOYD 3000 N. OCEAN DRIVE Street Address (P.O. Box Number is Not Acceptable) В2 SUITE 12-D SINGER ISLAND FL 33404 83 84 City 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 agont, 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 Signature, typod or printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstalling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE WRIGHT, FLOYD NAME 1.2 NAME 3000 N. OCEAN DRIVE, SUITE 12-D STREET ADDRESS 1.3 STREET ADDRESS SINGER ISLAND FL 33404 CITY-ST-ZIP 1.4 CITY - ST - ZIF DELETE Change Addition 21 TITLE TIT(F NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE 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 NAME 6.2 NAME

14. Thereby certify that the information supplied with the indicated on this annual report or supplemental and officer or director of the corporation of the resource Block 12 or Block 13 if changes offer an adjustment lalify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ored to execute the propert as required by Chapter 607, Florida Statutes; and that my name appears in

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

From We16HT 4-17-98 56-848-0155

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