FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 06 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 P96000036026 (8) DOCUMENT # FRANK'S SHUTTER SERVICE, INC. Principal Place of Business Mailing Address 7300 SOUTHWEST 134TH TERRACE 7300 SOUTHWEST 134TH TERRACE MIAMI FL 33156 MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0662750 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Γ 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name CALABRIA, JUAN E. **7300 SW 134TH TERRACE** 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 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 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 Signature, typod or product same of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition TITLE 1.1 TITLE ☐ Change NAME CALABRIA, JUAN E 1.2 NAME 7300 SOUTHWEST 134TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 21 TITLE CALABRIA, HERMAN NAME 2.2 NAME 7300 SOUTHWEST 134TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP 2.4 CiTY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE Calabria, Maria a NAME 3.2 NAME 7300 SOUTHWEST 134TH TERRACE STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL 33156 CITY-ST-ZiP 3.4 CITY-ST-ZIP Change DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 43 STREET ADDRESS CITY - ST - ZIP 44 CITY - ST- ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition TELLE 6 1 TITLE

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 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 13 if changed, or on an attention my an agreement. Block 12 or Block 13 if changed, or on an att SUAN E. CALABRIA SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS

64 CiTY-ST-ZiP

NAME

STREET ADDRESS

CITY-ST-7IP