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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600038663 (6)

AARD WOLF, INC.

Principal Place of Business Mailing Address 2213 CLARCONA FID 2213 CLARCONA RD APOPKA FL 32703-7907 APOPKA FL 32703-7907 3. Date Incorporated or Qualified 3s. Date of Last Report 04/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3375200 Not Applicable 21 26 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 Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent MULLICA, LARRY J **6010 MOUNTEL COURT** 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32810-4116 83 64 Zip Code City 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typed or printed name of registured agent and title if applicable (NOT) Registered Agent signature required when ministating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change 1110LF TITLE MULLICA, LARRY J 1.2 NAME NAME **6**010 MOUNTEL COURT 1,3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32810-4116 CITY-SY-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 217411 TITLE **MULLICA, BARBARA** 2.2 NAME NAME **6010 MOUNTEL COURT** STREET ADDRESS 2.3 STREET ADDRESS **ORLANDO FL 32810-4116** CITY-ST-ZIP Change DELETE Addition TITLE 3 1 1HTLE NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - \$1 - 7IP CITY-ST-ZIP DELETE ☐ Change Addition 4.1 TITLE TITLE

64CRY-ST-ZIP

14. I do 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 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 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.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

4.3 STREET ADDRESS 4.4 City-St-Zip

5.3 STREFT ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

01011451155

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME STREET ADDRESS

TITLE

NAME

SIGROM VELL THE PALK OF

DELETE

DELETE

4/24/97

Change

Change

Addition

Addition

FILED

May 02 1997 8:00am

Secretary of State