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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000041276 (2)

CHARM GROUP, INC.

Principal Place of Business Mailing Address 32 FAIRWAY COURT

FILED Apr 20 1998 8:00am Secretary of State



32 FAIRWAY COURT **ALBANY NY 12208** ALBANY NY 12208 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/13/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-2249310 21 Not Applicable 26 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 23 28 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible **⊠** No 25 29 Personal Property Tax due June 30. ☐ Yes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 VOGEL, JAMES D ESQUIRE Name 3936 TAMIAMI TRAIL NORTH 82 Street Address (P.O. Box Number is Not Acceptable) SUITE B MIDWEST TITLE BLDG. 83 NAPLES FL 33940 84 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 registered agent and title if applicable itered Agent signature required when reinstating) (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition Change TIFLE 1.1 TITLE BARON, CHARLES NAME 1.2 NAME CRZE034 32 FAIRWAY COURT STREET ADDRESS 1.3 STREET ADDRESS ALBANY NY 12208 CITY-SY-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE PURCELL, ANN NAME 2.2 NAME 33 FAIRWAY COURT STREET ADDRESS 2.3 STREET ADDRESS **ALBANY NY 12208** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE **GOUSSOUS, HAIDER** NAME 3.2 NAME 4 VALLEY VIEW DRIVE STREET ADDRESS 3.3 STREET ADDRESS ALBANY NY 12208 CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 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 61 TABLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS 6.4 CITY-ST-ZIP

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 suppliemental 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 Pleids 13 of Pleids 14 of Pleids 14 of Pleids 13 of Pleids 14 of Pleids 13 of Pleids 14 of Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

518/438-7624