SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

AND FILED **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 97 AUG -5 AM 7: 56 ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS SECRETARY OF STATE DOCUMENT # P96000043675 (3) TALLAHASSEE, FLORIDA 2-1.00 CARDS, ETC., INC. Mailing Address Principal Place of Business 13971 N. CLEVELAND AVENUE 13971 N. CLEVELAND AVENUE N. FT. MYERS FL \$3903 N. FT. MYERS FL 33903 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report <u>05/15/1996</u> 28. Mailing Address 2. Principal Place of Business Applied For 65-0676006 21 Not Applie 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additiona 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zφ Z(p)Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 RUSSELL, JEFF L Ku ssel 1443 PASSIC AVE 82 FT MYERS FL 33901 83 Zip Code 3 3 9 0 3 84 City x ers 11. Pursuant to the provisions of Sections 697.0502 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. (NOTE Begisted of Alfrit self attre Jeffrey L. Russell, Preside, + Signature, typed or printed name of regish and a general and title it applicable SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13 DILETE Proideny Change Addition TITLE 1.1 TITLE RUSSELL, JEFF L Jetfreyt. Russel NAME 1.2 NAME 4210 yarmouth Ct. 1443 PASSIC AVE STREET ADDRESS 1.3 STREET ADDRESS N. Ft. Myers FL 33903 FT MYERS FL 33901 CITY-ST-ZIP 1.4 CHY-S1-7IP DELETE ☐ Change Addition TITLE 2.1 11118 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE 500002263005----08/11/97--01067--002 NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS ****165.00 ****165.00 CITY-ST-ZIF 4.4 C/TY - S1 - Z/P DELETE Change 5.1 TITLE Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CHY-S1-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 61 1III F NAME 6.3 STREET ADDRESS

APPROVED

SIGNATURE: Odlan & Richall Politic Hateletent Presell Provider 7-71-97 941-995-4211

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 eath; that if 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, or on an attachment with an address.

STREET ADDRESS CITY-ST-ZIP