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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000043781 (9)

THE FIRE MANAGEMENT GROUP INC.

FILED Jan 20 1998 8:00am Secretary of State

Mailing Address Principal Place of Business 742 79TH CIRCLE SOUTH 742 79TH CIRCLE SOUTH ST. PETERSBURG FL 33707 ST. PETERSBURG FL 33707 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/16/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3385494 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. Ē \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Zip Country Zic This corporation owes or has paid the current year intangible ☐ Yes ☐ No 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KNIGHT, JERRY G 742 79TH CIRCLE SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) ST. PETERSBURG FL 33707 83 84 City 85 Zip Code 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 D DELETE 1.1 TITLE Change Addition TITLE KNIGHT, JERRY G NAME 1.2 NAME R2E034 742 79TH CIRCLE SOUTH STREET ADDRESS 1,3 STREET ADDRESS ST. PETERSBURG FL 33707 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE ROSENTHAL, STEVEN NAME 2.2 NAME 8264 136TH STREET NORTH STREET ADDRESS 2.3 STREET ADDRESS SEMINOLE FL 34646 CITY-ST-ZIF 2, 4 CITY - ST - 2IP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4, CITY-ST-ZIP ___ DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 CITY-ST-ZIP DELETE Change Addition TITLE NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 12 or Block 13 if changed, or on an attachment with a paddress.

SIGNATURE:

ECITO LES

813-347-4066