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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000051225 (6)

DANTES INTERNATIONAL MARKETING, INC.

FILED Feb 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4110 SOUTHPOINT BOULEVARD #220 4110 SOUTHPOINT BOULEVARD #220 SOUTHPOINT SOUARE II SOUTHPOINT SQUARE II DO NOT WRITE IN THIS SPACE JACKSONVILLE FL 32216 JACKSONVILLE FL 32216 3. Date incorporated or Qualified 06/11/1996 Applied For 2. Principal Place of Business 2a, Mailing Address 4, FEI Number 59-3394213 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 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 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Zip Country Country 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHRISTMAN, LEWIS E IN 4110 SOUTHPOINT BOULEVARD #220 82 Street Address (P.O. Box Number is Not Acceptable) SOUTHPOINT SQUARE II 83 JACKSONVILLE FL 32216 84 City 85 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 (NOTE: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETÉ ☐ Change Addition TITLE 1.1 TITLE CHRISTMAN, LEWIS E # NAME 1.2 NAME 4110 SOUTHPOINT BOULEVARD #220 STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32216 1.4 CITY - ST - ZIP CITY-\$1-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-St-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I 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 trustee empewores to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in