

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000070778 (1)

1. Corporation Name

PENTAD CORPORATION

Principal Place of Business

1655 PALM BEACH LAKES BLVD. STE 810
WEST PALM BEACH FL 33401

Mailing Address

1655 PALM BEACH LAKES BLVD. STE 810
WEST PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/23/1996

4. FEI Number

65-0704194

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible

Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 5725 Corporate Way

Suite, Apt. #, etc.

22 Suite 106

City & State

23 West Palm Beach, FL

Zip

24 33407

Country

25 USA

2a. Mailing Address

26 5725 Corporate Way

Suite, Apt. #, etc.

27 Suite 106

City & State

28 West Palm Beach, FL

Zip

29 33407

Country

30 USA

9. Name and Address of Current Registered Agent

JAMES, KEITH A

1655 PALM BEACH LAKES BLVD. STE 810
WEST PALM BEACH FL 33401

5725 Corporate Way, Suite 106
West Palm Beach, FL 33407

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME BRYANT, WILLIAM J
STREET ADDRESS 204 WEST OCEAN BLVD.
CITY-ST-ZIP STUART FL 34994

TITLE ☐ DELETE

NAME JAMES, KEITH A
STREET ADDRESS 1655 PALM BEACH LAKES BLVD. STE 810
CITY-ST-ZIP WEST PALM BEACH FL 33401

TITLE ☐ DELETE

NAME LEE, LARRY JR.
STREET ADDRESS 2209 SOUTH 25TH ST
CITY-ST-ZIP FORT PIERCE FL 34947

TITLE ☐ DELETE

NAME NELSON, TONY D
STREET ADDRESS 219 WEST ADAMS ST STE 504
CITY-ST-ZIP JACKSONVILLE FL 32202

TITLE ☐ DELETE

NAME THOMAS, JOHN C
STREET ADDRESS 508 EAST PARK AVENUE
CITY-ST-ZIP TALLAHASSEE FL 32301

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

5725 Corporate Way, Suite 106
West Palm Beach, FL 33407

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 registered 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.

SIGNATURE:

Keith A. James 4/29/98

(561) 606-1500

CR2E034 (10/97)