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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000072280 (6)

AGGRA, INC.

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CITY-ST-ZIP

14. I hereby certify that the information supplied with Inis filing indicated on this annual report or supplemental annual re-officer or director of the composition or the receiver of trus

attachmei

Block 12 or Block 13 if change i, or on an

Principal Place of Business Mailing Address 5101 NORTH HIGHWAY A1A #301 5101 NORTH HIGHWAY A1A #301 VERO BEACH FL 32963 VERO BEACH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/29/1996 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 65-0695582 Not Applicable 21 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 Trust Fund Contribution Added to Fees 23 28 Żip Country Zφ Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. ☐ Yes 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SMITH, JOEMAX 5101 NORTH HIGHWAY A1A, SUITE 301 Street Address (P.O. Box Number is Not Acceptable) **VERO BEACH FL 32963** 83 84 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PD □ DELETE Change Addition 1.1 TITLE TITLE **SMITH. DENNIS M** 1.2 NAME NAME 5101 NORTH HIGHWAY A1A #301 STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change Addition STD DELETE TITLE 2.1 TITLE SMITH. STEVEN L 2.2 NAME NAME 5101 NORTH HIGHWAY A1A #301 STREET ADDRESS 2.3 STREET ADDRESS VERO BEACH FL 32963 CITY-ST-ZIP 2.4 CITY-S1-ZIP Change Addition DELETE TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME **4.2 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 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP Addition DELETE Change 6.1 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

6.4 CITY - ST - ZIP

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of the first rule and accurate and that my signature shall have the same legal effect as if made under oath; that I am an increase of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in an address.

FILED Apr 22 1998 8:00am Secretary of State

