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PROFIT CORPORATION ANNUAL REPORT



H ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 19 1998 8:00am

Secretary of State

CR2E034 (10/97

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P96000077002 (9) AUSBORN ENTERPRISES, INC. Principal Place of Business Mailing Address 12445 62ND STREET NORTH 12445 62ND STREET NORTH SUITE 303 SUITE 303 DO NOT WRITE IN THIS SPACE **LARGO FL 33773 LARGO FL 33773** 3 Date Incorporated or Qualified 09/16/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-3388630 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zω Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AUSBORN, ROBERT 12445 62ND STREET NORTH Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 303 В3 LARGO FL 33723 84 City 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutos, 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. Hereby accept the appointment as registered agent. Ham familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature typed or precedination of registered agent and little diapple abid. (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Addition D 1.1 TITLE Change TITLE AUSBORN, ROBERT NAME 1.2 NAME 12445 62 SIN #303 LANGO 6 33773 2971 BONAVENTURE CT. 1.3 STREET ADDRESS STREET ADDRESS PALM HARBOR FL 34684 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAMÉ STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS

14. Thereby 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 reporter of trustee implement to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if grianged or or have accurate an appearance of the corporation of the corporati anged SIGNATURE