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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9600080144 (4)

## FILED May 05 1998 8:00am Secretary of State

MYRALYNN'S ENTERPRISES INC. Principal Place of Business Mailing Address 1705 SW 4TH ST. 1705 SW 4TH ST FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/26/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For **NOT APPLICABLE** 21 26 Not Applicable 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 Zin Country Country Zin 8. This corporation owes or has paid the current year Intangible □ No 25 Personal Property Tax due June 30. M Yes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SLATER, CHARLES A 81 1705 8W 4TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33312 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, typod or printed name of registered agent and tide if applicable (NOTE: Registered Agont signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1 1 TITLE Change Addition SLATER, CHARLES A NAME 1.2 NAME 1705 SW 4TH ST. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33312 CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.1 TITLE TUTWILER, MYRALYNN B 2.2 NAME 1705 SW 4TH ST. STREET ADDRESS 2 3 STREET ADDRESS FT. LAUDERDALE FL 33312 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 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 44 CITY-ST-ZIP DELETE TITLE 5.1 1ITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Addition TITLE 6.1 TITLE Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-SY-ZIP 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 an address.

RIGHATURE: Charles a SLATER 425/98 954-522-3234