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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE NAME

STREET ADDRESS

Block 12 or Block 13 if changed,

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 30 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000084080 (6)

MODERN CONCEPTS, INC.

Principal Place of Business Mailing Address 4607 PALMETTO POINT DRIVE 4607 PALMETTO POINT DRIVE PALMETTO FL 34221 PALMETTO FL 34221 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/07/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0733046 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ALLEN, DONALD R 4607 PALMETTO POINT DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) PALMETTO FL 34221 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. DELETE Change Addition 1.1 TITLE TITLE **ALLEN, DONALD R** NAME 1.2 NAME 4607 PALMETTO POINT DRIVE 1.3 STREET ADDRESS STREET ADDRESS PALMETTO FL 34221 CITY-ST-ZIP 1.4 CITY - ST-ZIP Addition DELETE Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 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 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 **53 STREET ADDRESS** STREET ADDRESS CITY-\$T-ZIP 5.4 CITY+ST-ZIP

DELETE

61 TITLE

6.2 NAME

63 STREET ADDRESS

6.4 City-St-ZiP

14. Thereby 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 on an attachment with an address

Change

Addition