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

FILED
May 08 1998 8:00 am
Secretary of State

DOCUMENT # P96000087386

1. Corporation Name
Berneil, Enterprises, Inc.

Principal Place of Business
4980 U.S. Hwy. 98 N.
Lakeland, FL 33809

Mailing Address

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 4980 U.S. Hwy. 98 N.
Suite, Apt. #, etc.
22
City & State
23 Lakeland, FL
Zip 24 33809 Country 25 U.S.A.

2a. Mailing Address
26 Same
Suite, Apt. #, etc.
27
City & State
28 Same
Zip 29 Same Country 30 Same

3. Date Incorporated or Qualified
10/23/96

4. FEI Number
593405930
☐ 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

9. Name and Address of Current Registered Agent
Beryl M. Foster
6019 Crane Dr.
Lakeland, FL 33809

10. Name and Address of New Registered Agent
81 Name Neil Foster
82 Street Address (P.O. Box Number is Not Acceptable) 222 Carpenters Way #15
83
84 City Lakeland FL 85 Zip Code 33805

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 _____ 4.28.98
Signature of an officer or director of the corporation (NOT Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1998	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT BERYL M. FOSTER 6019 CRANE DR. LKLD., FL 33809 ☑ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	PRESIDENT (P)/V/T/S/D NEIL FOSTER 222 CARPENTER'S WAY #15 LAKELAND, FL 33805 ☐ Change ☑ Addition
2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ DELETE		☐ Change ☐ Addition
3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ DELETE		☐ Change ☐ Addition
4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ DELETE		☐ Change ☐ Addition
5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ DELETE		☐ Change ☐ Addition JC 5/11
6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ DELETE		☐ Change ☐ Addition 000002523580 -05/14/98--01060--005 ***150.00

CR2E034 (10/97)

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 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 added above or on an attached sheet with an address.

SIGNATURE: _____ 4.28.98 (941) 859-3736
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #