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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

STREET ADORESS

SIGNATURE:

P96000092721 (5)

A1A EAST, INC.

Principal Prace of Business Mailing Address 2453 SOUTH THIRD STREET 2453 SOUTH THIRD STREET JACKSONVILLE BEACH FL 32250 JACKSONVILLE BEACH FL 32250-4066 3. Date Incorporated or Qualified 3a. Date of Last Report 11/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HATHAWAY, RICHARD G 10151 DEERWOOD PARK BLVD., BLDG 100 (P.O. Box Number is Not Acc 82 SUITE 250 83 JACKSONVILLE FL 32256 84 JACKSONVILLE Zip Code 3 2 2.5 D 11. Pursuant to the provisions of Sections 607.0502 and 607.1598, 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 Schi change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam Intiliar with, and accept the obligations of. Socion 607.0505, Florida Statutes.

SIGNATURE SIGNATURE gent signature required when reinstating) of registered goent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS DELETE THLE TITLE Change MCGARVEY, JAMES N JR NAME 2 NAME 2453 SOUTH THIRD STREET STREET ADORESS 1.3 STREET ADDRESS JACKSONVILLE BEACH FL 32250 1.4 CITY - ST - ZIP CITY ST-7 P DELETE Addition TILL 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 00Y-St 7P 2.4 CITY - ST- ZIP DELETE THE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-SI DELETE LILE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS DOY-ST-7 P. 4.4 CITY - ST - ZIP DELETE Change Addition HILL 5.1 YITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-7 P 5.4 CITY - ST - ZIP DELETE Addition ☐ Change 1001 61 THE NAME 6.2 NAME

6.3 STREET ADDRESS

14. If do 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.