

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #P96000093856 (8)

1. Corporation Name:

FRENCHDALE MARKETING GROUP, INC.

Principal Place of Business 11900 Biscayne Blvd. Suite 760 Miami, FL 33181	Mailing Address 11900 Biscayne Blvd. Suite 760 Miami, FL 33181-2726
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2450 N.E. Miami Gardens Drive Suite, Apt. #, etc 22 2nd Floor City & State 23 North Miami Beach, FL Zip 24 33180	2a. Mailing Address 26 2450 N.E. Miami Gardens Drive Suite, Apt. #, etc. 27 2nd Floor City & State 28 North Miami Beach, FL Zip 29 33180
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3. Date Incorporated or Qualified 11/14/1996	4. FEI Number 65-0717259	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
**SUPRASKI, LOUIS A.
11900 Biscayne Blvd.
Suite 760
Miami, FL 33181**

10. Name and Address of New Registered Agent	
81 Name Supraski, Louis A.	85 Zip Code 33180
82 Street Address (P.O. Box Number is Not Acceptable) 2450 N.E. Miami Gardens Drive	
83 2nd Floor	
84 City North Miami Beach,	FL

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) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	☐ DELETE	11 TITLE D	☐ Change ☐ Addition
NAME Supraski, Louis A.		12 NAME Supraski, Louis A.	
STREET ADDRESS 11900 Biscayne Blvd., #760		13 STREET ADDRESS 2450 N.E. Miami Gardens Drive	
CITY-ST-ZIP Miami, Florida 33180		14 CITY-ST-ZIP North Miami Beach, FL 33180	
TITLE 	☐ DELETE	21 TITLE 	☐ Change ☐ Addition
NAME 		22 NAME 	
STREET ADDRESS 		23 STREET ADDRESS 	
CITY-ST-ZIP 		24 CITY-ST-ZIP 	
TITLE 	☐ DELETE	31 TITLE 	☐ Change ☐ Addition
NAME 		32 NAME 	
STREET ADDRESS 		33 STREET ADDRESS 	
CITY-ST-ZIP 		34 CITY-ST-ZIP 	
TITLE 	☐ DELETE	41 TITLE 	☐ Change ☐ Addition
NAME 		42 NAME 	
STREET ADDRESS 		43 STREET ADDRESS 	
CITY-ST-ZIP 		44 CITY-ST-ZIP 	
TITLE 	☐ DELETE	51 TITLE 	☐ Change ☐ Addition
NAME 		52 NAME 	
STREET ADDRESS 		53 STREET ADDRESS 	
CITY-ST-ZIP 		54 CITY-ST-ZIP 	
TITLE 	☐ DELETE	61 TITLE 	☐ Change ☐ Addition
NAME 		62 NAME 	
STREET ADDRESS 		63 STREET ADDRESS 	
CITY-ST-ZIP 		64 CITY-ST-ZIP 	

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 on an attachment with an address.

SIGNATURE:

LOUIS A. SUPRASKI

4-27-98 (305) 792-0060

CR2E034 (10/97)