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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000097243 (5) DOCUMENT #

FIRST MATE, INC.

FILED Feb 17 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 11050 NW 27TH STREET 11950 NW 27TH STREET PLANTATION FL 33323 PLANTATION FL 33323 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0700273 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible □ No Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ADAMS, RONALD 11950 NW 27TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33323 83 84 City 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 little if applicable (NO)) Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. DELETE Change Addition TITLE 1.1 TITLE ADAMS, RONALD CR2E034 NAME 1.2 NAME 11950 NW 27TH STREET STREET ADDRESS 1.3 STREET ADDRESS **PLANTATION FL 33323** CITY-ST-ZIP 14 CITY-ST-7IP DELETE 2.1 TITLE ☐ Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3.1 TITLE Change TITLE 3.2 NAME NAME STREET ADDRESS **3.3 STREET ADDRESS** CITY - ST - ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS City-St-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME **53 STREET ADDRESS** STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP CITY-ST-ZIP

14. Thereby 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 of the review or uncleaned to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed it or an algebraic production of the results and the same terms of the results and the same terms of the same terms of

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