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

DOCUMENT # P96000103713 (9)

GLENN FRIEDLY SALES, INC. Principal Place of Business Mailing Address 1135 PASADENA AVENUE SOUTH 1135 PASADENA AVENUE SOUTH SUITE 233 DO NOT WRITE IN THIS SPACE ST. PETERSBURG FL 33707 ST. PETERSBURG FL 33707 3. Date Incorporated or Qualified 12/23/1996 2, Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 59-3417735 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees 23 Zip Zip Country 8. This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 30 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FRIEDLY, GLENN C 1135 PASADENA AVENUE SOUTH 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 233** ST PETERSBURG FL 33707 84 City Zip Code 85 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 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE ☐ Change Addition FRIEDLY, GLENN C 1.2 NAME STREET ADDRESS 1135 PASADENA AVENUE SOUTH SUITE 233 1.3 STREET ADDRESS ST. PETERSBURG FL 33707 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 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 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 41 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-ZIF DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADORESS** 5.4 C/TY - ST - ZIP

6.4 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.

6.3 STREET ADDRESS

6.1 TITLE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

DELETE

FILED

Apr 15 1998 8:00am

Secretary of State

Addition

Change