FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Apr 08 1998 8:00am FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham Secretary of State Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1998 P97000001082 (1) DOCUMENT # DAVID L NAGRODSKY, INC. Mailing Address Principal Place of Business 2720 HARBOR CITY BLVD. 2720 HARBOR CITY BLVD. MELBOURNE FL 32935 MELBOURNE FL 32835 3. Date Incorporated or Qualified 12/30/1996 FEI Number 5 -34400**\$**8 2a. Mailing Address 2. Principal Place of Business APPLIED FOR 26 21 Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. 27 22 6. Election Campaign Financing City & State П 28 Trust Fund Contribution Zip Country Country 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 KINBERG, EDWARD J 2101 WAVERLY PLACE Street Address (P.O. Box Number is Not Acceptable) 62 SUITE 200 83 **MELBOURNE FL 32901** 84 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 prioted curve of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE NAME NAGRODSKY, DAVID L 1.2 NAME 4872 VERONA CIRCLE STREET ADDRESS 1.3 STREET ADDRESS **MELBOURNE FL 32940** CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME

DO NOT WRITE IN THIS SPACE Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Yes ☐ No Zip Code 85 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition CR2E034 Change Addition

Addition

Addition

Addition

Addition

Change

Change

Change

6.4 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 suppliemental 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 of 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 changing or or arrange chapter.

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY-ST-ZIP

3.4. CITY - ST - ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE.

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

NAME STREET ADDRESS

TITLE

NAME

ř

T

.

į

Ì

1

DELETE

DELETE

DELETE

0.2.98 400.253-0892