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**PROFIT** CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700004726 (0)

DU BARRY PLANTATION, INC.

## **FILED** Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 2900 EAST OAKLAND PARK BLVD.. SUITE 200 2900 EAST OAKLAND PARK BLVD.. SUITE 200 FT. LAUDERDALE FL 33306 FT. LAUDERDALE FL 33306 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/10/1997 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 650756661 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 ☐ Yes Personal Property Tax due June 30. 25 29 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SAUTTER, C. CHRISTIAN ESQ. Name 2900 EAST OAKLAND PARK BLVD., SUITE 200 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33306 83 84 City 85 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, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change Addition TITLE SHAM, SALLY 1 2 NAME NAME 2900 EAST OAKLAND PARK BLVD., SUITE 200 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33306 CITY-ST-ZIP 1.4 CITY - ST - ZIP Change ☐ Addition TITLE 2.1 TITLE SHAM, DAVID NAME 2.2 NAME 2900 EAST OAKLAND PARK BLVD., SUITE 200 STREET ADDRESS 23 STREET ADDRESS FT. LAUDERDALE FL 33306 CITY-ST-ZIP 2 4 CITY - ST - 7(P DELETE TT Change Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 44 CITY - ST- ZIP DELETE Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 in trusts ampowered 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 attactypent with an actives:

SIGNATURE:

954-423-8088