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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700006863 (9)

TOC ENTERPRISES, INC.

FILED Apr 10 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 776 BAY HARBOR TERRACE 776 BAY HARBOR TERRACE SEBASTIAN FL 82958 SEBASTIAN FL 32958 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65-0723487 21 Not Applicable 26 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 П 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name AMERILAWYER CHARTERED 343 **ALMERIA AVENUE** 82 Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 83 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11 TITLE COOK, THOMAS G NAME 1.2 NAME 776 BAY HARBOR TERRACE STREET ADDRESS 1.3 STREET ADDRESS **SEBASTIAN FL 32958** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change ___ Addition TITLE 2.1 TITLE COOK, ORPHA C NAME 2.2 NAME 776 BAY HARBOR TERRACE STREET ADDRESS 2.3 STREET ADDRESS **SEBASTIAN FL 32958** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 THEE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 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 6.3 STREET ADDRESS STREET ADDRESS 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 of trusted 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 in an attachment with an address.