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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

P97000007593 (1)

WINWORK, INC.

Principal Place of Business Mailing Address 303 N HIGH STREET 303 N HIGH STREET DELAND FL 32720 DELAND FL 32720

FILED Jan 29 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/27/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 59 -3426740 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. **\$8.75** Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Country 8. This corporation owes or has paid the current year intangible 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 SUNDERLAND, EDWINA H 303 N HIGH STREET Street Address (P.O. Box Number is Not Acceptable) 82 DELAND FL 32720 83 84 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 reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE Presiden+ DE! FTE 1.1 TITLE Change Edwina H.Sunderland NAME 12 NAME BOBN. High St. DeLand, FL 3 STREET ADDRESS 1.3 STREET ADDRESS 32720 CATY-ST-ZIP 1.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS City-St-7iP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3,2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST - ZIP TITLE ☐ DELETE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 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 STREET ADDRESS 6.3 STREET ADDRESS CITY-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.

1-Edwina H. Sunderland 1/15/98 904) 738-7475 SIGNATURE

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