

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 20 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000019862 (6)

1. Corporation Name

PRICE VENTURES, INC

Principal Place of Business

4010 SOUTH 57TH AVENUE  
SUITE 104A  
LAKE WORTH FL 33463

Mailing Address

4010 SOUTH 57TH AVENUE  
SUITE 104A  
LAKE WORTH FL 33463

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1997

4. FEI Number

65-073-2501

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒

Yes

☐

No

2. Principal Place of Business

21 3719 72<sup>ND</sup> Ave. E.

Suite, Apt. #, etc.

22 City & State

23 Sarasota FL

24 Zip 34243

25 Country USA

2a. Mailing Address

26 3719 72<sup>ND</sup> Ave E.

Suite, Apt. #, etc.

27 City & State

28 Sarasota FL

29 Zip 34243

30 Country USA

9. Name and Address of Current Registered Agent

QUIGLEY, VERN  
4010 SOUTH 57TH AVENUE  
SUITE 104A  
LAKE WORTH FL 33463

10. Name and Address of New Registered Agent

81 Name

Dawn Lyons

82 Street Address (P.O. Box Number is Not Acceptable)

3719 72<sup>ND</sup> Ave. E.

83

84 City

Sarasota

FL

85 Zip Code 34243

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 obligation of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the P applicable

(NOTE: Registered agent signature required when reinstating)

DATE

Dawn Lyons

4/2/98

12. OFFICERS AND DIRECTORS

TITLE P  
NAME PRICE, DEBRA  
STREET ADDRESS 4010 SOUTH 57TH AVENUE  
CITY-ST-ZIP LAKE WORTH FL 33463

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 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 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.

SIGNATURE

Debra Price

4/2/98

CR2E034 (10/97)