FILED FILE NOW: FILING FEE AFTER MAY 1ST IS,\$550.00 PROFIT FLORIDA DEPARTMENT OF STATE Mar 13 1998 8:00am CORPORATION Sandra B. Morthame ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000024142 (6) THE 1ST STEP SOBER HOUSE, INC. Principal Place of Business Mailing Address ŽÃO SOUTH CYPRESS ROAD #6074 POMPANO BEACH FL 33060 230 SOUTH CYPRESS ROAD #6071 POMPANO BEACH FL 33080 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/11/1997 2a. Mailing Address 4. FEI Number Applied For Principal Place of Business 1610 65-0777850 883 S.W. 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired П Fee Required 22 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent RECHT, GARY A 11 CENTENNIAL COURT 82 POMPANO BEACH FL 33073 his, the above-named corporation submits this statement for the purpose of changing authorized by the corporation's board of directors. I hereby accept the appointment a 0502 and 607.1508, Florida State orida Statutes SIGNATURE (NOTE Registereo Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE TITLE 1.1 TITLE Vice President Sec/Ir 1.2 NAME Richard D. Entriken NAME Gary A. Recht 4491 NW 94 Terr 1.3 STREET ADDRESS STREET ADDRESS 11 Centennial Ct. 1.4 CITY-ST-ZIP Sunrise, Fl. 33351 Pompano Beach, FL 33073 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 32 NAME

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 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 convolution or the occurrence of the convolution or the occurrence of the convolution of the occurrence occurrence of the occurrence occurrence

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DELETE

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SIGNATURE WAS THE

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME Street Address

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CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

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1/22/98

Change

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Addition

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