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

FILED Apr 09 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P97000024545 (0) PYRAMID SPHERE, INC. Principal Place of Business Mailing Address **570 WEST FIRST STREET** 570 WEST FIRST STREET RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current fee Zip Country ear Intangible 24 25 29 30 ☐ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **BROOKS, CURTIS** 81 Name **570 WEST FIRST STREET** 82 Street Address (P.O. Box Number is Not Acceptable) RIVIERA BEACH FL 33404 83 8 City Zip Code 11. Pursuant to the provisions of Socions 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 swinted name of registered agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE 1.1 TITLE Change **BROOKS, CURTIS** 1.2 NAME **570 WEST FIRST STREET** STREET ADDRESS 1.3 STREET ADDRESS RIVIERA BEACH FL 33404 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADORESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ☐ Change ☐ Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5 1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filling 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 charged, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME 6.3 STREET ADDRESS Change

Addition

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

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