

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION-
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Oct 01 1998 8:00am
Secretary of State

DOCUMENT # P97000032905 (6)

1. Corporation Name

SUMMER OLD, SUMMER NEW, INC.



Principal Place of Business

1821 MIDDLE RIVER DRIVE #6
FORT LAUDERDALE FL 33305

1918 NE 32nd Ave

Mailing Address

1821 MIDDLE RIVER DRIVE #6
FORT LAUDERDALE FL 33305

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/11/1997

4. FEI Number

04-325-6675

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 1918 NE 32nd Ave.

Suite, Apt. #, etc.

23 City & State

Fort Lauderdale FL

24 Zip

33305

25 Country

USA

2a. Mailing Address

26 1918 NE 32nd Ave

Suite, Apt. #, etc.

27 City & State

Fort Lauderdale FL

28 Zip

33305

29 Country

USA

9. Name and Address of Current Registered Agent

CONVERY FOLTZ, SUSAN
1821 MIDDLE RIVER DRIVE #6
FORT LAUDERDALE FL 33305

10. Name and Address of New Registered Agent

81 Name

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

1918 NE 32nd Avenue

83

84 City

Fort Lauderdale

FL

85 Zip Code

33305

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 *Susan C. Foltz, President*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

8/21/98
DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME CONVERY FOLTZ, SUSAN
STREET ADDRESS 1821 MIDDLE RIVER DRIVE #6
CITY-ST-ZIP FORT LAUDERDALE FL 33305

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
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TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 1918 NE 32nd Avenue

1.4 CITY-ST-ZIP FORT LAUDERDALE, FL 33305

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME Secretary

2.3 STREET ADDRESS Robert F. Foltz

2.4 CITY-ST-ZIP 1918 NE 32nd Avenue

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 *Susan C. Foltz, President* 8/21/98 454 E66-13107

CR2E034 (5/98)