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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700033905

FILED Jan 21, 1999 8:00am Secretary of State

01-21-1999 90058 030 ***150.00

1. Corporation Name MALONEY'S, INC. Principal Place of Business Mailing Address 852 MIRACLE MILE P.O. BOX 1672 VERO BEACH FL 32960 VERO BEACH FL 32961 DO NOT WRITE IN THIS SPACE 3 Date Incorporated or Qualifed 04/14/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0746447 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country This corporation owes the current year Intangible Personal Property Tax. 24 25 30 Personal Property Tax. □No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MALONEY, DENNIS P Street Address (P.O. Box Number is Not Acceptable) 346 53RD CIRCLE VERO BEACH FL 32968 83 City Zip Code 85 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 OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE TITLE 1.1 TITLE ☐ Change MALONEY, DENNIS P NAME 12 NAME 346 53RD CIRCLE STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL 32968 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TTLE MALONEY, CYNTHIA L NAME 2.2 NAME 346 53RD CIRCLE STREET ADDRESS 2.3 STREET ADDRESS VERO BEACH FL 32968 CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE TITLE ☐ DELETE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 61 TITLE ☐ DELETE ☐ Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE

ONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-99 (561) 569-6870

CR2E034 (11/98)