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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700038697 (3)

TREE'S WINGS ENTERPRISES, INC.

FILED May 01 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 603 ROYAL PALM BEACH BLVD 603 ROYAL PALM BEACH BLVD ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 04/30/1997 2. Principal Place of Business 2a. Mailing Address Applied For C65-0753628 21 Not Applicable 26 Suite, Apt. #. atc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country $Z_{\rm ID}$ 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 25 29 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent KANOUSE, KEITH J 81 Namo 2424 N FEDERAL HIGHWAY SUITE 353 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 84 City Zip Code **B**5 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 (NOTE Registered Agen) a gnature required when reinstaling) Signature, typed or printed name of registored agent and title if applicable (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition TITLE 1.1 TITLE Change THOMPSON, GLENN NAME 1.2 NAME 603 ROYAL PALM BEACH BLVD STREET ADDRESS 1.3 STREET ADDRESS **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP 1.4 CITY - ST - 21P DELETE Change Addition 2.1 TITLE THOMPSON, CINDY NAME 2.2 NAME **603 ROYAL PALM BEACH BLVD** STREET ADDRESS 2.3 STREE1 ADDRESS **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE ☐ Change MAYNARD, ANDY 3.2 NAME NAME 603 ROYAL PALM BEACH BLVD STREET ADDRESS 3 3 STREET ADDRESS ROYAL PALM BEACH FL 33411 CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Addition Change TITLE 41 TITLE BEEMILLER, MICHAEL NAME 4.2 NAME 603 ROYAL PALM BEACH BLVD STREET ADDRESS 4.3 STREET ADDRESS **ROYAL PALM BEACH FL 33411** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

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 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 13 if changed, or on an attachment with an address.

SIGNATURE:

AUNER MAYNDE

anil 14 1998