MAY-18-99 05:11 PM STEVE C WITTMER 82

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Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90225 037 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P97000042920

1. Corporation Name
LUCKY L, INC.

Principal Place of Business
1040 CHEROKEE BLUFF
GREENSBORO GA 30642

Mailing Address
1040 CHEROKEE BLUFF
GREENSBORO GA 30642

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business | 2a. Mailing Address
Suite, Apt. #, etc. | Suite, Apt. #, etc.
City & State | City & State
Zip Country | Zip Country

3. Date Incorporated or Qualified: 05/13/1997

4. FEI Number: 65-0754391 ☐ 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 the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

~~CORPORATION SERVICE COMPANY~~ STEVE WITTMER
~~1201 HAYS STREET~~ 4627 PONCE DE LEON
~~TALLAHASSEE FL 32301-2525~~ CORAL GABLES
FLA 33146

10. Name and Address of New Registered Agent

Name: Steven C. Wittmer
Street Address (P.O. Box Number is Not Acceptable): 4627 Ponce De Leon Blvd.
City: Coral Gables FL Zip Code 33146

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: Steven C Wittmer 5/19/99

(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LUDWIG, JOHN
STREET ADDRESS	1040 CHEROKEE BLUFF
CITY-ST-ZIP	GREENSBORO GA 30642
TITLE	STD
NAME	MADDEN, ELIZABETH
STREET ADDRESS	1070 LINGER LONGER ROAD
CITY-ST-ZIP	GREENSBORO GA 30642
TITLE	VPD
NAME	LUDWIG, ROBERT
STREET ADDRESS	152 BALBAY DRIVE
CITY-ST-ZIP	BAL HARBOR FL 33154

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(blank)

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: [signature] 4/10/99 (706) 467-3651

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)