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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthant

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000046972 (0)

SOUTH OCEAN ENTERPRISES, INC.

Mailing Address

FILED Jun 29 1998 8:00am Secretary of State



Principal Place of Business 4158 N BROWNING DR 4158 N BROWNING DR WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33406 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1997 2. Principal Place of Business 2a. Mailing Address Applied For 65 - 08 26 Not Applicable Suite, Apt. #. elic Suite, Apt #, etc. \$8.75 Additional Certificate of Status Desired Fee Regulred 22 27 City & State City & State 5. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Country Zip 8. This corporation owes or has paid the current year Intangible 25 ☐ Yes ∏ Ño Personal Property Tax due Jurie 30. 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 ORNELAS, DENNISE 4158 N BROWNING DR **B2** Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33406 83 64 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 rogistered agent, or both, if 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 Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable OM ICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 X Change DELETE 1.1 TOLE residen t TITLE NAME 1.2 NAME ennise STREET ADDRESS 1.3 STREET ADDRESS 33406 CITY-ST-ZIP 1.4 CHY - ST - ZIP DELETE rmando Rivero TITLE 2.1 TITLE President NAME 2.2 NAME VICE 41 58 Browning STREET ADDRESS 2.3 STREET ADDRESS West Palm Beach, FL. 33406 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change X Addition DELETE Secretary Pedro Ordelas TITLE 3.1 TITLE NAME 3.2 NAME Browning DR. Polm Beach, FL. 33406 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 61 TITLE -06/30/98--01071--037 Change TITLE NAME 62 NAME ***150,00 STREET AODRESS 63 STREET ADDRESS CITY-ST-ZIP 64 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 this 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.