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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000047381 (3) DOCUMENT #

BOGLE ENTERPRISES, INC.

FILED Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 70 FRANCISCAN LANE CONG 4888 PALM COAST PARKWAY PALM COAST FL 82137 PALM COAST FL 32137 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1997 2. Principal Place of Business 21 4888 PAIm 2a. Mailing Address Applied For 4888 PAlm Const Pkwy 26 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing COAST PAlm 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible USA USA 24 Yes 25 29 Personal Property Tax due June 30. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **BOGLE, DALLAS G** BOGLE, DALIAS **70 FRANCISCAN LANE** 82 Street Address (P.O. Box Number is Not Acceptable) PALM COAST FL 32137 Sutton ct 63 Zip Code 84 COAst 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. 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) 12. OFFICERS AND DIP ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE DAHAS G BOGILE NAME 1.2 NAME 3 SUTTON LT STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP 14 CITY-ST-7P PAIN COAST R 32177 DELETE 21 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY - ST- ZIP DELETE Change Addition TITLE 41 TITLE 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP DELETE ☐ Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-2IP

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 the 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 trusted 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.

4-15-58