


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

FILED
Mar 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000053466 (3)

1. Corporation Name
THREE NAILS INCORPORATED

Principal Place of Business
700 EAST UNION STREET
#D2
JACKSONVILLE FL 32202

Mailing Address
439 SAPELO ROAD
JACKSONVILLE FL 32216

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/16/1997

4. FEI Number

59-3465207

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 or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

ENCINOSA, ALAN W
439 SAPELO ROAD
JACKSONVILLE FL 32216

10. Name and Address of New Registered Agent

81 Name Gary McNary
82 Street Address (P.O. Box Number Is Not Acceptable)
700 East Union Street
83 Suite # D-2
84 City Jacksonville FL 85 Zip Code 32206

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

Alan Encinosa
Signature, typed or printed name of registered agent and title, if applicable.

Res.

(NOTE: Registered Agent signature required when reinstating)

3-17-98
DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
President
Gary McNary
700 East Union St. # D2
Jax. FL. 32206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Vice-President
Chuck Robinson
700 East Union St. # D2
Jax. FL. 32206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Treasurer
AL Winter
700 East Union St. # D2
Jax. FL. 32206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Secretary
Alan Encinosa
700 East Union St. # D2
Jax. FL. 32206

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

Alan W. Encinosa

3-17-98 (904) 356-2000

CR2E034 (10/97)