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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P97000057713 (4)

MARTELLO'S, INC.

Principal Place of Business 11018 ST. AUGUSTINE RD., STE. 107 Mailing Address

FILED Apr 16 1998 8:00am Secretary of State



11018 ST. AUGUSTINE RD., STE. 107 JACKSONVILLE FL 32257 JACKSONVILLE FL 32257 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/07/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, elc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes □ Ño 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name ROTHSTEIN, SIMON D OOPER STE. 104, 4417 BEACH BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 JACKSONVILLE FL 32207 107 83 Zip Code 3225 ACK SON VICE 11. Pursuant to the provisions of Sections 607.0502 and 607.0502, 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 607.6505. Florida Statutes. name of registered agent and tille if appli SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Addition 1.1 TELE Change COOPER, BARBARA E NAME 1.2 NAME 11018 ST. AUGUSTINE RD., STE. 107 STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL 32257 City-St-7iP 1.4 CITY-ST-ZIP DVS TITLE DELETE 2.1 TITLE Change Addition COOPER, LARRY NAME 2.2 NAME 11018 ST. AUGUSTINE RD., STE. 107 STREET ADDRESS 2.3 STREET ADDRESS JACKSONVILLE FL 32257 CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ☐ DELETE TITLE Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 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.

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