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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 98 APR 29 PM 2: 07 P97000060792 (3) DOCUMENT # SECRETARY OF STATE TALLAHASSEE. FLORIDA GOLF ONE AMERICA, INC. Principal Place of Business Mailing Address 9400 SW 130TH AVE. 9400 SW 130TH AVE. MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/14/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zın Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEITZMAN, JACK L 11420 SW 109 RD. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33176** 600002513918-- -05/06/98--01097--003 83 84 City 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 Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition HALL, JAMES 1.2 NAME 9400 SW 130TH AVE. STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE ☐ Change Addition **VISAGGIO, PAUL** NAME **2.2 NAME** 9400 SW 130TH AVE. STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition **NEVILLE, THOMAS F** NAME **3.2 NAME** 9400 SW 130TH AVE. STREET ADDRESS 3.3 STREET ADDRESS **MIAMI FL 33186** CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE ☐ Change Addition NAME 4 2 NAME STREET ADDRESS 4.9 STHEET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition 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** CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(), Florida Statules. I further certify that the informatic indicated on this annual report or adipplemental 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 charged, or on an aper-inment with an address. lorida Statules. I further certify that the information

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