FILE NOW: FILING FEMAFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT 19**98

PENSACOLA FL 32501



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000062186 (6) DOCUMENT #

STATRAD, INC.

FILED May 14 1998 8:00am Secretary of State

incipal Place of Business Mailing Address			DO NOT WRITE IN THIS SPACE	
S150 BAYOU BLVD Suite 2-a Pensacola fl 32503	S150 BAYOU BLYD Suite 2-A Pensacola Fl 32503			
			3. Date Incorporated or Qualified 07/17/1997	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		59-3458922	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25	Zip 30	Country	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent year Intangible X Yes No
9, Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
STACKHOUSE, HARRY B 125 W ROMANA ST SUITE 800		81 Name 82 Street Ad	dress (P.O. Box Number is Not Acceptable)	

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 nume of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE ABBOTT, FRANK D JR. NAME 1.2 NAME 5150 BAYOU BLVD SUITE 2-A STREET ADDRESS 1.3 STREET ADDRESS PENSACOLA FL 32503 CITY-ST-ZIP 1.4 CITY - ST-ZIP DELETE Addition Change TITLE 2.1 TITLE STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change ■ Addition 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition | TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME

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 correction 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 clumped, or on an attachment with an address.

6.3 STREET ADDRESS

STREET ADDRESS

1 41-20-98

250-1171 81 0x

Zip Code