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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700065975 (9)

FILED Feb 03 1998 8:00am Secretary of State

PHOENIX INDUSTRIES OF U.S.A., INC. Principal Place of Business Mailing Address 69 EAST 14TH STREET 69 EAST 14TH STREET HIALEAH FL 33010 HIALEAH FL 33010 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/30/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0772456 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 27 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 Y Yes 29 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RODRIGUEZ, PATRICIA M 81 69 EAST 14TH STREET Street Address (P.O. Box Number is Not Acceptable) HIALEAH FL 33010 83 Zip Code 85 FI 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 lamiliar 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) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Change Addition TITLE RODRIGUEZ, PATRICIA M NAME 1.2 NAME **32E034** 69 EAST 14TH STREET STREET ADDRESS 1.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 1,4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE RODRIGUEZ, PATRICIA M 2.2 NAME NAME 69 EAST 14TH STREET STREET ADDRESS 2.3 STREET ADDRESS HIALEAH FL 33010 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TiTLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP TITLE DELETE 5.1 TITLE Change ☐ Addition 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 withe receiver or true and exercise the same legal effect as if made under oath; that I am an officer or director of the corporation with receiver or true and exercise the same legal effect as if made under oath; that I am an officer or director of the corporation with the exercise that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation with the exercise that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation with the exercise that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation with the exercise of the corporation of the exercise of the exe

MASEQUIRED

SIGNATURE:

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