07131999-90014-038-$500.00-$500.00

999.

AMOUNT DUE ON OR BEFORE 05/1/1999: $500 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750)

FILED
Jul 13, 1999 8:00 am
Secretary of State

07-13-1999 90014 038 ***500.00
09-23-1999 90002 025 ****50.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000066969

1. Corporation Name
TWENTY-TWO ENTERPRISES, INC.

587410 - 90014 - 38

Principal Place of Business	Mailing Address
9526 NE 2 AVE 104 MIAMI SHORES FL 33138 US	9526 N.E. 2ND AVE., STE. 102 STE 104 MIAMI SHORES FL 33138 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/31/1997

4. FEI Number: 65-0777330 ☐ 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 the current year Intangible Personal Property. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LOBLACK, PETER
707 SE 3RD AVE., STE. 401
FORT LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name: Anthony J. Hall
82 Street Address (P.O. Box Number is Not Acceptable): 9526 N.E. 2nd Avenue
83: Suite 102
84 City: Miami Shores FL 85 Zip Code: 33138

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] ANTHONY HALL DATE: 7/6/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HALL, A J 9526 NE 2 AVE, 102 MIAMI SHORES FL 33015	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P HALL, A.J. 9526 NE 2 Ave, 102 Miami Shores, FL 33138	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T ORR, N N 9526 NE 2 AVE, 104 MIAMI SHORES FL 33015	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	T S ORR, N. N. 9526 NE 2 Ave, 104 Miami Shores, FL 33138	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	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.

305-758-8334

SIGNATURE: [signature] ANTHONY J. HALL July 8, 1999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #