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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF GORPORATIONS

P97000070575 (0) DOCUMENT #

S & R COLTON ENTERPRISES, INC.

Principal Place of Business

Mailing Address

631 US HWY, 1, STE, 410

FILED Jun 22 1998 8:00am Secretary of State



631 US HWY. 1, STE. 410 N. PALM BEACH FL 33408 N. PALM BEACH FL 33408 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/14/1997 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 21 26 Not Applicable Suite, Apt. #. etc. 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 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 COLTON, SCOTT M 631 US HWY. 1, STE. 410 82 Street Address (P.O. Box Number is Not Acceptable) N. PALM BEACH FL 33408 83 City 85 Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when re-instating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.111116 Change ___ Addition COLTON, SCOTT M NAME 1.2 NAME CR2E034 631 US HWY. 1, STE. 410 STREET ADDRESS 13 STREET ADDRESS N. PALM BEACH FL 33408 CITY-ST-ZIP 14 CITY-ST-ZIP TITLE DELETE 211011 Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP TITLE DELETE Change Addition 3.1 1111€ NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHTY - 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 - S1 - ZIP ☐ Change TITLE DELFTE 6.1 TITLE Addition SOCORSE7675 NAME 6.2 NAME -**06/**22/98--01052---0**0**0 STREET ADDRESS 6.3 STREET ADDRESS ***150.00 CITY+ST-ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing closs 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 employed annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this apport as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an adechment with an address.