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

FILED Mar 19 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Socretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P97000074929 (5) RANDOLPH SHIPPING, INC. Principal Place of Business Mailing Address 15271-16 MCGREGOR BLVD. 15271-16 MOGREGOR BLVD. FORT MYERS FL 33908 FORT MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/28/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0776960 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. X Yes ☐ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LINDENMAYER, DONALD L 15271-16 MCGREGOR BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) FORT MYERS FL 33908 83 84 City Zip Code 85 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 have of orgetim diagent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1 1 TITLE ☐ Change 🔏 Addition DOWALD & LINDENNIAJER 12 NAME NAME 5006 SW 2771 1.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 1.4 CITY-ST-ZIP SHAC CORAL, Change DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE Addition TITLE 31 TITLE __ Change 3 2 NAME NAME STREET ADDRESS 3 3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change ☐ Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 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 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 attrictment with an address.

6.4 CITY - ST - ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

TITLE

NAME

STREET ADDRESS

DITY-ST-ZIP

DOWALD L. LINDOWNA JON 3/13/99 SIGNATURE:

Change

Addition