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May 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 97000014449

1. Corporation Name

Medi-Six International Corporation

Principal Place of Business

P970000078540
4518-S Del Prado Blvd. Ste 105
Cape Coral FL 33904

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

30

g. Name and Address of Current Registered Agent

Stephanie Wolff
4518-S Del Prado Blvd Ste 105
Cape Coral FL 33904

11. Pursuant to the provisions of Sections 602 (b)(2) and 602 (b)(3), 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 602 (b)(2), Florida Statutes.

SIGNATURE

Signature of person to whom this report is being filed (if applicable)

Signature of Registered Agent (required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
☐ OFFICER	<u>Stephanie Wolff</u>	<u>4518-S Del Prado Blvd Ste 105</u>	<u>Cape Coral FL 33904</u>
☒ DIRECTOR	<u>Allen M Wolff</u>	<u>4518-S Del Prado Blvd Ste 105</u>	<u>Cape Coral FL 33904</u>
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			
☐ OFFICER			

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP
☐ Change ☐ Addition			
☐ Change ☐ Addition			
☐ Change ☐ Addition			
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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 of this document, or in an attachment with an address.

SIGNATURE: Stephanie Wolff

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