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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000080480 (1) DOCUMENT #

FILED Feb 10 1998 8:00am Secretary of State

LBC OF PALM BEACH, INC. Principal Place of Business Mailing Address 2695 N MILITARY TRAIL 2695 N MILITARY TRAIL WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/16/1997 4) FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0778986 21 26 Not Applicable Suite, Apt #. etc Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6, Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name CANTOR, ROBERT 2695 N MILITARY TRAIL 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33409 83 City 84 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statu of Florida Such change was authorized by the corporation's board of directors. Floreby 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 reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. D DELFTE Change Addition TITLE 1.1 TITLE CANTOR, ROBERT NAME 1.2 NAME 2695 N MILITARY TRAIL STREET ADDRESS 1.3 STREET ADDRESS **WEST PALM BEACH FL 33409** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2 1 TITLE TITLE CANTOR, LINDA 2.2 NAME NAME 2695 N MILITARY TRAIL 2 3 STREET ADDRESS STREET ADORESS WEST PALM BEACH FL 33409 CITY - ST - ZIP 2 4 City - St - ZIP ☐ Change DELETE Addition 31 TITLE TITLE NAME 3.2 NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST- ZIP CITY-ST-ZIP

14. Thereby 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 supplienimal 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 gran attachment with an address

SIGNATURE:

LINDA CANTOR, D.

(561) 478-9310

CR2E034 (10/97