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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

FILED

Apr 27 1998 8:00am

Secretary of State

Change

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Addition

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Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000102308 (8)

G H D MAINTENENCE & REPAIR INC.

Principal Place of Business Mailing Address 548 S. DIXIE HYWAY E. 548 S. DIXIE HYWAY E. POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/01/1997 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apl. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country ZID 8. This corporation owes or has paid the current year Intangible □ No ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DOLLOPH, GEORGE Name 548 S DIXIE HYWAY E Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33060 83 84 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title il applicable (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition DELETE Change THILE 1.1 TITLE DOLLOPH, GEORGE 1.2 NAME 548 S. DIXIE HYWAY E. STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33060 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ■ Addition 2.1 TITLE TITLE NAME 2.2 NAME

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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 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.

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4/6/98