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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # P 97000106850

100002493751--7
-04/20/98--01071--004
*****35.00 *****35.00

1. Corporation Name
DAWN OF A NEW DAY, INC

Principal Place of Business: 3269 W. Broward Blvd. Fort Lauderdale, FlA 33311

Mailing Address: SAME

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 SAME	26 SAME
22 Suite, Apt #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

3. Date Incorporated or Qualified: Dec 19, 1997
4. FEI Number: 65-0803097 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
SONJA MC GILL
5801 NW 19th STREET
Lauderhill, FlA 33313

10. Name and Address of New Registered Agent
81 Name: FRANK LLOYD
82 Street Address (P.O. Box Number is Not Acceptable): 3269 W. Broward Blvd
83
84 City: Fort Lauderdale FL
85 Zip Code: 33311

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: Frank Lloyd Treasurer [signature] 4/09/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ DELETE Kurtin Pinckley President	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☒ Change ☒ Addition Earl Lloyd, President 3651 N.W. 26 St FT. Laud, FlA 33311
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE Velma Brownlee 164 NW. 26th Ave FT. Laud, FlA 33311	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition SAME
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ DELETE Sonja McGill Sec/Tres	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☒ Change ☐ Addition Jacquinta Lloyd, Secretary 4570 NW. 20th Ave Lauderhill, FlA 33319
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE ~~Frank Lloyd~~	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☒ Addition FRANK LLOYD, Treasurer 3269 W. Broward Blvd FT. Laud, FlA 33311
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ 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 if changed, or on an attachment with an address.

SIGNATURE: [signature] Frank Lloyd 4/29/98 583-0870
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/97)