1/27/99 561-276-2411

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PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Katherine Harris **ANNUAL REPORT** Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 HAR 22 PM 2: 00 DOCUMENT # P98000001531 TALLAHASSEE, FLORIDA 1. Corporation Name ED YOUNG, SR., INC. Principal Place of Business Mailing Address 2102 S FEDERAL HWY 2102 S FEDERAL HWY DELRAY BEACH FL 33483 DELRAY BEACH FL 33483 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/05/1998 2. Principal Place of Business 2a. Mailing Address Applied For Number 65-0803504 26 Same Sulle, Apl. #, etc. Same Sulte, Apt. #, etc Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Country Country This corporation owes the current year Intangible
Personal Property Tax.

 Xell Yes 29 25 30 Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent YOUNG, EDWIN W SR. Street Address (P.O. Box Number is Not Acceptable) 2102 S FEDERAL HWY **DELRAY BEACH FL 33483** 83 84 City 85 Zip Code 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 CR2E034 (11/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 ITTLE Change (Additio YOUNG, EDWIN W SR. NAME 1 2 Maker 2102 S FEDERAL HWY STREET ADDRES 1.3 STREET ADDRESS DELRAY BEACH FL 33483 C/TY-51-24P 14 CHY- ST-Z0 DELETE TILE 21 TITLE Change Addition NAME 22 NAME STREET ADDRES 2.3 STREET ADDRESS CITY-ST-ZE 2 4 CITY-ST-2IP DELETE Change Addition 3 1 TITLE NAME 32 NAME STREET ADDRES 3.3 STREET ADDRESS C/TY-ST-ZIP 34 CTY-57-21P MILE DELETE 41 ITTLE Chenge ☐ Addition NAME 4.2 NAME STREET ADORES 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-200 TITLE DELETE Change ☐ Addition 51 TITLE NAME 52 NAME 5.3 STREET ADORESS STREET ADDRESS \$4 CITY-5T-21P CITY-ST-ZIP TITLE DELETE Change ☐ Addition NAME 82 NAME 6.3 STREET ADORESS STREET ADDRESS 64 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not quasify for the exemption stated in Section 19.07(3)). Floride 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 507, Floride Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.