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

FILED Feb 20 1998 8:00am PROFIT. FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P9800012034 Market Street Realty Inc. Principal Place of Business 1200 Cicek Woods DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 4. FEI Number 28. Mailing Address Applied For Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired samo Fee Required DUN 22 City & State \$5.00 May Be 6. Election Campaign Financing 24 Trust Fund Contribution Added to Fees 23 Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 29 30 Personal Property Tax due June 30. 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name Stephanie 82 Street Address (P.O. Box Number is Not Acceptable) Crack Woods Grole 83 64 City 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 brand 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when roinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change K Addition 1.1 TITLE TITLE Stephange schiano 1.2 NAME NAME 1200 Creek woods Cardle St. Clarg FL 34772 13 STREET ADDRESS STREET ADDRESS 14 CITY - ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition 2 1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP CITY - ST - 7IP DELETE 4.1 TITLE Change ☐ Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-S1-2IP 4 4 CITY - ST - ZIP DELETE TITLE 5 1 MILE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

64 CITY - ST - ZIP 14. Thereby 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 suppliermental 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

6'1 TITLE

6.2 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

700002437137 -02/23/98--01004--015

***61.25

DELETE

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME