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

PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # S26180 CYNTHIA L. JUDGE, P.A. Principal Place of Business 670 N COURTENAY PKWY MEBRITT ISLAND FL 32953 2. Principal Place of Business MERRITT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 02 1998 8:00am Secretary of State



10/97

Mailing Address 870 N COURTENAT PKWY DO NOT WRITE IN THIS SPACE MERRITT ISLAND FL 32853 3. Date Incorporated or Qualified 01/18/1991 4. FEI Number 2a. Mailing Address Applied For P.O. BOX 542156 59-3052045 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Couptry 8. This corporation owes or has paid the current year Intangible DREVARO SKEVANO Yes Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name JUDGE, CYNTHIA L. 879-N. COURTENAY-PKWY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 12 COURTENAY 83 MERRITT ISLAND FT 32953 84 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 board of directors. I hereby accept the appointment as registered agent. I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes. CYNTHIA JU06E SIGNATURE (NOTE Registered Agent signature required when reinstating) ed agent and title if applicable OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. X Change Addition ☐ DELETE 1.1 TITLE TITLE JUDGE, CYNTHIA L. JUDGE, CYNTHIA L. NAME 1.2 NAME SuiTE 108 1607 WAVECREST AVENUE 2460 N. COURTENAY PRWY, STREET ADORESS 1.3 STREET ADDRESS MERRITT ISLAND FL 1.4 CITY-ST-ZIP MERRITT ISLAND, FL CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - ST - ZIE DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - 7IP Change TITLE DELETE 4 1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ Addition DELETE Change TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - S1 - ZIP 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 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.

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