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

PROFIT Mar 26 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # S37142 (4) SUNSHINE INTERNATIONAL, LTD., INC. Principal Place of Business Mailing Address BOX 5713 BOX 5713 LAKELAND FL 33807 LAKELAND FL 33807 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/07/1991 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 59:3077171 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DIAMOND, D. JERRY 1509 S. FLORIDA AVE, SUITE 3 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 304 83 LAKELAND FL 33803 84 City 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 if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition **CEO** NAME DIAMOND, DONELL J 1.2 NAME 1509 S. FLOIRDA AVE, SUITE 3 STREET ADDRESS 1.3 STREET ADDRESS <u>Lakeland fl</u> CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition ☐ DELETE Change TITLE VAS 2.1 TITLE KENNEDY, JAMES L NAME 2.2 NAME 1509 S. FLORIDA AVE., SUTIE 3 STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE HOWE, DAVID NAME 3.2 NAME STREET ADDRESS 1211 TECH. BLVD., SUITE 101 3.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETÉ TITLE 41 TITLE Change Addition NAME JOWKOWSKY, MICHAEL 4. 2 NAME 8 CUSHING ST STREET ADDRESS 4.3 STREET ADDRESS **PROVIDENCE RI** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME FANNIN, TERESA B 5.2 NAME 1509 S. FLORIDA AVE, SUITE 3 STREET ADDRESS 5.3 STREET ADDRESS LAKELAND FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change ___ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

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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.