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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S53961 (6)

CRITSER SPECIALTIES INCORPORATED Principal Place of Business Mailing Address 3901 N 37TH AVE 3901 N 37TH AVE HOLLYWOOD FL 33021 HOLLYWOOD FL 33021 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1991 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0268684 Not Applicable 26 Suite, Apl. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CRITSER, RAMONA K. 3901 N 37TH AVE 62 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 84 Zip Code 85 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change Addition DELETE 1.1 TITLE TITLE CRITSER, EDWARD D. NAME 1.2 NAME 3901 N 37TH AVE 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CHY-ST-ZIP DELETE Change Addition TITLE 21 TITLE CRITSER, RAMONA K. 22 NAME NAME 3901 N 37TH AVE 2.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change DELETE Addition 3 1 THILE TITLE NAME 3.2 NAME STREET ADDRESS **3.3 STREET ADDRESS** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 THILE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-\$1-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-\$T-ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-S1-ZIP

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 13 if changed, or on an attachment with an address.

4/1/00 (OCU) 912-7778

FILED

Apr 14 1998 8:00am

Secretary of State