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

FILED Apr 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 #**1. Corporation Name S63208 (0)SEAL-IT INC. Principal Place of Business Mailing Address 3791 SILVER STAR RD 3791 SILVER STAR RD. ORLANDO FL 32808 ORLANDO FL 32808 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/28/1991 2. Principal Place of Business 2a. Mailing Address Applied For 59-308 1883 21 26 Not Applicable Suite. Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes ☐ No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DAVIS, ROLAND 7200 WESTPOINT BLVD., #1515 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32811 83 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 registored 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 Change Addition DAVIS, ROLAND P NAME 1.2 NAME 7200 WESTPOINT BLVD., #1515 STREE! ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY - ST - ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TiTLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Addition 5.1 TITLE Change NAME 5.2 NAME

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 supplies 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 recovery of the corporation or the recovery of the results of the corporation or the recovery of the results of the corporation or the recovery of the results of the corporation of the results of the results of the corporation of the results of the r officer or director of the corpo Block 12 or Block 13 if change

T DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CHTY-ST-ZIP

CITY-S1-7IP

TITLE

NAME

407-299-6400

Change

Addition

CR2E034 (10/97