SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

14. I do hereby certify that the info information indicated on this at I am an officer or director of the appears in Block 12 or Block 1

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) Sep 19 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # S75823 (2)LABBETT NORTH DESIGNS, INC. Principal Place of Business Mailing Address 1121 E LAS OLAS BLVD 1121 E LAS OLAS BLVD FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report <u>08/26/1991</u> 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 2100 S D Cean-21 65-0280596 Not Applicable Suite, Ant. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 1505 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip 8. This corporation owes or has paid the current year Intangible TV Yes 24 25 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name LABBETT, DEREK 1121 E LAS OLAS BLVD 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33301 83 84 Cily 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) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TIME LABBETT, DEREK NAME 1.2 NAME CR2E034 **25 HAYDEN STREET** STREET ADDRESS 1.3 STREET ADDRESS TORONTO, ONT. 14 CHY-ST-7IP CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NORTH, ELAINE NAME 2.2 NAME 1211 E. LAS OLAS BLVD. STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Change 4.1 TITLE Addition TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 2IP DELETE TITLE 5.1 THLE Change Addition 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6111716 NAME 6.2 NAMÉ STREET ADORESS 6.3 STREET ADDRESS CMY-ST-ZIP 64 City-St-7IP

s filing does not qualify for the exemption stated in Section 119,07(3)(i). Florida Statutes. I further certify that the otal annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that yer or trustee empowered to execute this report as foquired by Chapter 607, Florida Statutes; and that my name such upon with an address.

FILED