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

Mar 09 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 # S76075 (8) 121 DUVAL COMPANY Principal Place of Business Mailing Address 2832 NE 21ST COURT 121 DUVAL STREET C/O PENER P. PARIS FT LAUDENDALE FL 33305 KEYWEST FL 33040 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/27/1991 2. Principal Place of Business 4. FEI Number Applied For 23 FRONT STAKET 21 65-0284565 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees MONROR Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent PARIS, PETER D 81 Name SEVEN 2832 NE-2181 COURT Street Address (P.O. Box Number is Not Acceptable) 82 FT LAUDERDALE FL 33305 MIDDLE RIVER 83 84 City Zip Code LAUDERDALE 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. TEVEN e of registered agent and title if applicable required when reinstating) (NOTE: Registered Agent ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE TITLE Change 11TITLE ITTAH, CHARLES NAME 1.2 NAME 3702 DONALD ST STREET ADDRESS 1.3 STREET ADDRESS KEYWEST FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 TITL€ NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE DELETE Change ☐ Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST-ZIP 6.4 CITY-ST-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 of 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 accommendation of the corporation of the