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

SIGNATURE:

Apr 27 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT** # (4)S97980 PECK BROKERAGE, INC. Principal Place of Business Mailing Address 901 BAY ST. BOI BAY ST. LINIT FOR HAIT 101 DO NOT WRITE IN THIS SPACE VERO BEACH FL 32963 VERO BEACH FL 32963 3. Date Incorporated or Qualified 12/03/1991 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0299956 Not Applicable Suite, Apt. #. etc. Suite, Apt #, etc. \$8.75 Additional П 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible Yes Yes □ No 24 25 29 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HUDSON, DOROTHY A 2125 WINDWARD WAY Street Address (P.O. Box Number is Not Acceptable) SUITE 200 63 **VERO BEACH FL 32963** 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 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 Stonature, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstaling) DATE CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE PECK, JOHN A 1.2 NAME NAME 901 BAY ROAD, UNIT 101 STREET ADORESS 1.3 STREET ADDRESS VERO BEACH FL CITY-ST-ZIP 1.4 CITY - ST- ZIP Change DELETE 2.1 TITLE ☐ Addition PECK, KEVIN 2.2 NAME 47 SPRINGWOOD PATH 2.3 STREET ADDRESS STREET ADDRESS LAUREL HOLLOW NY CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 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 or ruspee 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 a haddress.

FILED

2/28/98

561-231-3083