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

CITY - \$1 - ZIF

Block 12 or Block 13 if changed, or on an attachment with an address.

FILED PROFIT Apr 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V02697 (3) RIO GRANDE MINHMART, INC. Principal Place of Business Mailing Address 2900 S RIO GRANDE AVENUE 113 S MACDILL AVENUE ORLANDO FL 32805 SUITE B DO NOT WRITE IN THIS SPACE TAMPA FL 33609 3. Date Incorporated or Qualified HS 12/27/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-3099953 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees 8. This corporation owes or has paid the current year.

1. This corporation owes or has paid the current year.

2. This corporation owes or has paid the current year.

3. Yes Zip Country nt year intangible 24 25 29 30 Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHANG, SUNG SOO 4813 WINGROVE BLVD 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32805 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELFTE THTLE __ Change ___ Addition CHANG, SUNG SOO NAME 1.2 NAME CR2E034 **4813 WINGROVE BLVD** STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TETLE DECETE 2.1 TITLE ___ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - ST - ZIP DELETE TITLE 31 TITLE Change Addition NAME 3.2 NAME STREET ADORESS 3.3 STREET ADORESS CITY-ST-ZIP 3 4. CITY+ST-ZIP DELETE TITLE 41 TITLE ☐ Change ☐ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP TITLE DELETE Change Addition 51 TULE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP TITLE DELFTE Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

1111-108