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

PROFIT

SIGNATURE:

CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V04137 FBK FINANCIAL CORP. Principal Place of Business Mailing Address 11921 S. DIXIE HWY 11921 S. DIXIE HWY SUITE 202 DO NOT WRITE IN THIS SPACE MIAMI FL 33156 MIAMI FL 33156 3. Date Incorporated or Qualified 01/06/1992 2. Principal Place of Business 2a. Mailing Address Applied For 65-0331101 Not Applicable Suite Apt # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes Yes □ No Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ross SHORE, H. ALLAN **MUSEUM TOWER - SUITE 2500 B2** 150 WEST FLAGLER ST MIAMI FL 33130 d 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered orda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of Section 607.0505, Florida Statutes. office or registered agen agent. I am familiar with SIGNATURE (NOTE Registered Agent signature required when reinstaling 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE FRANK, FRANKLIN 11921 S DIXIE HWY, #202 STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY - ST - ZIP TT DELETE Addition TITLE 21 TITLE MARLIN, BARRY NAME 22 NAME 11921 S DIXIE HWY, #202 STREET ADORESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Addition 3 1 TITLE TITLE MARLIN, KENNETH 3 2 NAME NAME 11921 S DIXIE HWY, #202 STREET ADDRESS 3.3 STREET ADDRESS CITY #51 - ZIP 34 CITY-ST-ZIP DELETE 4 1 TITLE Change ■ Addition 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME STOCET ADDRESS 5 3 STREET ADDRESS 54 CITY-S1-ZIP CON-ST-ZIP DELETE Change Addition 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS Thereby cortify 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 of the receiver or 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 attachment with an address

FLORIDA DEPARTMENT DE STATE

FILED

Feb 18 1998 8:00am

305-255-2747