FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (4) DOCUMENT # MONTANA INVESTMENTS, INC. Mailing Address Principal Place of Business 721 U.S. HWY, ONE, STE, 113 721 U.S. HWY. ONE. STE. 113 N. PALM BCH. FL 33408 N. PALM BCH. FL 33408 3. Date Incorporated or Qualified 3a. Date of Last Benort 03/07/1995 02/11/1992 Applied For 4. FE! Number 2. Principal Place of Business 2a. Mailing Address 65-0314418 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 Orty & State 6. Election Campaign Financing \$5.00 May Be City & State \Box Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Zip ☐ Yes ☐ No Elorida Statutes 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 CLARK, RICHARD E Street Address (P.O. Box Number is Not Acceptable) 82 721 U.S. HWY. ONE, STE. 113 83 NORTH PALM BCH, FL 33408 Zip Code 84 City 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NCTE Bagestered Agent signature required when rematating Signature, typed or printed name of registered agent and the diappinaries CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DVST DELETE Change Addit:on 1 1 Tillut TITLE BRENNAN, J B 1.2 NAME NAME 801 LAKE SHORE DRIVE 202 STREET ADDRESS 1.3 STREET ADDRESS LAKE PARK FL 33403 14 CITY - ST - ZIP CITY-ST-ZIP Change Add-tion DELETE TITLE 2 1 TITLE MONTANA, MICHAEL 2.2 NAME NAME 801 LAKE SHORE DR., #202 2.3 STREET ADDRESS STREET ADDRESS LAKE PARK FL 33403 24 CiTY-ST ZiP CITY - ST- Z-P Change Addition DELETE 3 1 TIFLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZIP CITY-ST-ZIP 300001819403° -05/14/96--01006--027 DELETE ☐ Addition 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS ***200.00 4.4 CITY - S1 - ZIP DITY-ST-ZiP ☐ Change Addition DELETE 5 LIGHT TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP Change ncitibbA 🔲 DELETE 6 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 Cily - \$1 - 209 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed or on an attachment with an address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

4/24/96