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

CITY - ST - ZIP

SIGNATURE:

Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** (3) HOWARD ENTERPRISES, INC. Principal Place of Business Mailing Address **607 TULIP LANE 807 TULIP LN** VERO BEACH FL 32963 VERO BOH FL 32963 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/21/1992 2. Principal Place of Business 2a. Mailing Address Applied For 65-0314103 26 Not Applicable 21 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Ζŧρ Country Zip Country This corporation owes or has paid the current fear Intangible Yes 29 Personal Property Tax due June 30. 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 STEWART, WILLIAM J. 3355 OCEAN DR 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32963 вэ City 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 Signature, typind or printed name of registered agent and bile if applicable (NOTE, Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE ☐ Addition TITLE 1.1 TITLE Change HOWARD, FRANK G. 1.2 NAME 607 TULIP LANE STREET ADDRESS 1.3 STREET ADDRESS VERO BEACH FL 1.4 City-St-ZiP CITY - ST - ZIP DELETE Change ☐ Addition TITLE 2.1 THLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP Change DELETE 3.1 THTLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Change Addition 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 NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

64 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 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.

414/98

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FILED