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

SIGNATURE

PROFIT Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)PAUL'S GARDENING, INC. Mailing Address Principal Place of Business 3485 38TH AVENUE SE 3465 38TH AVENUE SE NAPLES FL 33964 NAPLES FL 33964 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/13/1992 2. Principal Place of Business 2a. Mailing Address Applied For 65-0317186 Not Applicable 21 26 \$8.75 Additional Suite. Apt. #. etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intangible Zip Country $Z_{\rm IP}$ Yes Personal Property Tax due June 30. 30 24 25 29 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent Name WOODWARD, CRAIG R. WOODWARD, PIRES & ANDERSON P.A. Street Address (P.O. Box Number is Not Acceptable) 606 BALD EAGLE DRIVE, SUITE 500 83 MARCO ISLAND FL 33937 64 City 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Addition DELETE Change TITLE 1.1 TITLE WOODWARD, PAUL 1.2 NAME NAME 3485 38TH AVENUE SE 1.3 STREET ADDRESS STREET ADDRESS NAPLES FL 33964 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition □ DELETE 31 TITLE TITLE 3.2 NAME HALAF **3.3 STREET ADDRESS** STREET ADDRESS 34. CiTY-ST-ZIP CITY - ST - ZYP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby 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 ennual 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 CITY-ST-ZIP

FILED