~~SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.~~
~~AMOUNT DUE ON OR BEFORE 09/30/98: $563 IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $563~~

FILED
Sep 14 1998 8:00am
Secretary of State

AMENDED PROFIT CORPORATION ANNUAL REPORT
1998 $61.25

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V27706

1. Corporation Name: Premiere Body Stop, Inc.

Principal Place of Business: 4561 NW 8th Avenue, Oakland Park Fl 33309

Mailing Address:

AMENDMENT

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 4-92

4. FEI Number: 65-0325877 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 4561 NW 8th Ave	26 SAME
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Oakland Park Fl	28 City & State
24 Zip: 33309 — 25 Country: USA	29 Zip — 30 Country

9. Name and Address of Current Registered Agent

Carl W Jobson
5309 Flamingo Place
Coconut Creek Fl 33073

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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] Carl Jobson President — DATE: 9/3/98

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	President	☐ DELETE
NAME	Carl W Jobson	
STREET ADDRESS	5309 Flamingo Place	
CITY-ST-ZIP	Coconut Creek Fl 33073	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Secretary / Treasurer	☐ Change ☒ Addition
1.2 NAME	Summer Jobson	
1.3 STREET ADDRESS	5309 Flamingo Place	
1.4 CITY-ST-ZIP	Coconut Creek Fl 33073	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME	800002643118	
6.3 STREET ADDRESS	-09/18/98--01039--040	
6.4 CITY-ST-ZIP	***61.25	

CR2E034 (5/98)

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.

SIGNATURE: [signature] 9/3/98 954 772 8562