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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V43487

(0)

SUMMER HOLDINGS, INC.

ER HOLDINGS, INC.

Principal Place of Business Mailing Address

FILED Apr 15 1998 8:00am Secretary of State



| 321 ROYAL POINCIANA PLAZA<br>PALM BEACH FL 33480   |   | 321 ROYAL POINCIANA PLAZA<br>PALM BEACH FL 33480 |              |  |              | DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified                      |               |                |  |
|--|---|--|--------------|--|--------------|--|---------------|----------------|--|
|  |   |  |              |  |              | 06/12/1992   |               |                |  |
| 2. Principal Pr  | ace of Business                         | 2a. Mailing Address                              |              |  |              | 4. FEI Number  | A             | pplied For     |  |
| 21   |   | 26   |              |  |              | 65-0348588   | N             | ot Applicable  |  |
| Suite, Apt.  | #, <b>9</b> 1C.                         | Suite, Apt. #, etc.                              |              |  |              | 5. Certificate of Status Desired S8.75 Additional Fee Required                     |               |                |  |
| City & State   |   | City & State                                     |              |  |              | C Floating Compaign Figure in  |               | <del></del>    |  |
| 23   |   | 28   |              |  |              | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |               |                |  |
| Zip  | Country                                 | Zip 7  | Country      |  |              | 8. This corporation owes or has paid the cu  |               |                |  |
| 24   | 25                                      | <del>                                     </del> | ō            |  |              | ,  | ´ -           | No             |  |
|  | 9. Name and Address of Current          |  | <u> </u>     |  |              | 10. Name and Address of New Registered Agent                                       |               |                |  |
| MA   | AS DODD D                               |  | 81           | Na   | ame          |  |               |                |  |
| MAAS, ROBB R.<br>321 ROYAL POINCIANA PLAZA   |   |  |              | 2 Street Address (P.O. Box Number is Not Acceptable) |              |  |               |                |  |
|  | M BEACH FL 33480                        |  |              |  | reet Addre   | ddress (P.O. Box Number is Not Acceptable)   |               |                |  |
|  |   |  | 83           |  |              |  |               |                |  |
|  |   |  | 84           | Ci   | ity          | Fi   | <b>85</b> 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 typind or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE   |   |  |              |  |              |  |               |                |  |
| 12.  | OFFICERS AND                            |  | 13.          |  |              | ADDITIONS/CHANGES TO OFFICERS AN   | D DIRECTOR    | RS IN 12       |  |
| TITLE  |   |  | 1.1 TITLE    | ·· <del>··</del>                                     |              |  | Change        | Addition       |  |
| NAME   | MATTEL JAMES E. 123                     |  | 1.2 NAME     |  | 1            |  |               | 1              |  |
| STREET ADDRESS   | 3510 TURTLE CREEK BLVD.                 | TANT TO S WING SE BON                            | 1.3 STREE    | T AODE   | RES <b>S</b> |  |               |                |  |
| CITY-ST-ZIP  | DALLAS TX-75219                         | CHARLOTTE, NE D                                  | Ochy-        |  |              |  |               | 1              |  |
| TITLE  | VP                                      | DELETE   | 2.1 TITLE    | 31-71  | -+           |  | Change        | Addition       |  |
| NAME   | MATTEL, CARY J                          |  | 2.2 NAME     |  |              |  | C Citalian    |                |  |
| ···  |   |  | 8            |  | Nenc         |  |               | 1              |  |
| STREET ADDRESS   | 301 E. DURHAM DRIVE<br>Mobile al        |  |              | 2.3 STREET ADDRESS                                   |              |  |               | 1              |  |
| CITY-ST-ZIP<br>TITLE   |   | DELETE   | 2.4 CITY -   | SI - ZII   | P            |  | Change        | Addition       |  |
| · · · · · · · · · · · · · · · · · · ·  | ST MATTER MANEO O                       | C) beere   | ł            |  | - 1          |  | ☐ Citange     | ווטוווטטא ניים |  |
| NAME   | 111111111111111111111111111111111111111 |  | 3 2 NAME     |  |              |  |               | Ì              |  |
| STREET ADDRESS   | 301 E. DURHAM DRIVE                     |  | 3.3 STREE    |  | - 1          |  |               | - 1            |  |
| CITY-ST-ZIP  |   |  |              | 3.4. CITY - ST - ZIP                                 |              |  |               |                |  |
| TITLE  |   |  | 4.1 TITLE    |  |              |  | Change        | ☐ Addition     |  |
| NAME   |   |  | 4. 2 NAME    |  |              |  |               | ,              |  |
| STREET ADDRESS   | 321 ROYAL POINCIANA PLAZ                | 1  | 4.3 STREET   |  |              |  |               |                |  |
| CITY-ST-ZIP  | PALM BEACH FL                           |  | 4.4 CITY - S | ST-ZIP   | ·            |  |               |                |  |
| TITLE  |   | L] DELETE  | 5.1 TITLE    |  | }            |  | Change        | ☐ Addition     |  |
| NAME   |   |  | 5.2 NAME     |  |              |  |               |                |  |
| STREET ADDRESS   |   |  | 5.3 STREE    | rdda 1   | RESS         |  |               |                |  |
| CITY-ST-ZIP  |   |  | 5.4 CITY - 9 | ST-ZIP   | <u> </u>     |  |               |                |  |
| TITLE  | DELÉTE 6.1 TI                           |  | 6.1 TITLE    | 6.1 TITLE  |              |  | Change        | Addition       |  |
| NAME   |   |  | 6.2 NAME     |  | J            |  |               |                |  |
| STREET ADDRESS   |   |  | 63 STREET    | ADDA   | RESS         | ٠.   |               | ĺ              |  |
| CITY-ST-ZIP  |   |  | 64 CITY - S  | 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 suppliemental 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. |   |  |              |  |              |  |               |                |  |