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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V52529

FIRST CLASS PRODUCTS, INC.

(7)

FILED May 08 1998 8:00am Secretary of State



		····		9 BOBAL BIBIA BABIL BABIL HUBA	
Principal Place of Business	Mailing Address				
6335 MOBILE HYW	6335 MOBILE HWY				
PENSACOLA FL 32526 PENSACOLA FL 32526 US			DO NOT WRITE IN THIS	DO NOT WRITE IN THIS SPACE	
00			3. Date Incorporated or Qualified		
			07/23/1992		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 26			59-3199353	Not Applicable	
Sulte, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
27			5. Certificate of Status Desired	Fee Required	
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	28		Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	8. This corporation owes or has paid the cu	rrent vear Intangible	
24 25	29 3	0		☑ Yes ☐ No	
9, Name and Address of Current		<u> </u>	10. Name and Address of New Registered	Agent	
LEWIS, DAIRD 81 Name					
ACCA ALIEUR AT					
PENSACOLA FL 32505			idress (P.O. Box Number is Not Acceptable)		
83 100 12					
		" _	<u> </u>		
		84 City	encocola FL	85 Zip Code	
	1002 1002 51 11 61				
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 ager		Registered Agent signature rec	ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTODO IN 40	
12. OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
LEWIS DAVID	☐ DEL€TE	1.1 TITLE	President,	Change Addition	
NAME LEWIS, DAVID		1.2 NAME	David Leupis		
STREET ADDRESS 6258 N "W" ST		1.3 STREET ADORESS	19332 (Jidaile Man).		
CITY-ST-ZIP PENSACOLA FL		1.4 CITY-ST-ZIP	tersocola, the 3350	3 b	
TITLE	☐ DELETE	2.1 TITLE	•	Change Addition	
NAME		2.2 NAME			
STREET ADDRESS		2.3 STREET ADDRESS	•		
CITY-ST-ZIP		2. 4 CITY - ST - ZIP			
TITLE	DELETE	3.1 TITLE		Change Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		: 3.4. CITY-ST-ZIP			
TITLE	☐ DELETE	4.1 TITLE	20	Change Addition	
NAME		4, 2 NAME	\$ 00° C		
STREET ADDRESS		4.3 STREET ADDRESS	× 2		
CITY-ST-ZIP		4.4 CITY - ST - ZIP	14 12 18 CO.		
TITLE	DELETE	5.1 TITLE		Change Addition	
NAME	—	5.2 NAME		<u> </u>	
STREET ADDRESS		5.3 STREET ADDRESS			
CITY-ST-ZIP	DELETE	5.4 CITY-ST-ZIP		Change Addition	
TITLE	והין הברגוב	6.1 TITLE		Change C Modifoli	
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY - ST - ZIP	in Section 119.07(2Vi) Florida Statutas I further of	anition should show the former of	

ii. 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 revort 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 receiptry further exemplement 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 or an attaching of the property full of address.

NAME OF