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

PROFIT

Apr 24 1998 8:00am CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V54416 (5) TRUSS ONE, INC. Principal Place of Business Mailing Address 1415 S FEDERAL HWY 1415 S FEDERAL HWY **BOYNTON BEACH FL 33435-6003** BOYNTON BEACH FL 33435-6003 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/31/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-0347700 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible Yes No 29 Personal Property Tax due June 30. 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Ri Name VLASSIS, DENNIS 1415 S. FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) **BOYNTON BEACH FL 33435-6003** 83 84 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE ☐ Addition TITLE 1.1 TITLE Change GRAVES, HAROLD E JR 1.2 NAME NAME 191 E MILLER AVE STREET ADDRESS 1.3 STREET ADDRESS AKRON OH 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE CAMPBELL, FRANCIS P JR NAME 22 NAME 191 E MILLER AVE STREET ADDRESS 2.3 STREET ADDRESS AKRON OH CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3 1 TITLE GRAVES, S KEITH NAME 3.2 NAME 191 E MILLER AVE STREET ADDRESS 3.3 STREET ADDRESS AKRON OH 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE O'NEILL, PATRICK NAME 4. 2 NAME 191 E MILLER AVE STREET ADDRESS 4.3 STREET ADDRESS AKRON OH 4.4 CITY+ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 51 TITLE VLASSIS, DENNIS NAME 5.2 NAME 1415 S FEDERAL HWY STREET ADDRESS 5.3 STREET ADDRESS **BOYNTON BEACH FL** 5.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE 6.1 TITLE Change NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 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 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 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 supplied with the land 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 trustify emphasized by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or of an attachment with kind of each of the corporation of the corpora

FLORIDA DEPARTMENT OF STATE

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