FILED FILE NOW: FILING FEE IS \$61.25 May 08 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # 725334 POST 682,JWV HOLDING CORP. Principal Place of Business Mailing Address C/O RALPH LEVINE C/O RALPH LEVINE 3. Date Incorporated or Qualified 2880 NE 203 ST. APT.1 2880 NE 203 ST. APT.1 01/11/1973 MIAMI FL 33180 MIAMI FL 33180 4. FEI Number Applied For 65-0054164 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 27 Trust Fund Contribution Added to Fees 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 📜 No 23 28 Ζiρ Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LEVINE, RALPH Street Address (P.O. Box Number is Not Acceptable) 2880 NE 203RD ST. 63 APT. 1 **MIAMI FL 33180** Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Addition DELETE Change TITLE 1.1 TITLE HAME ALTER, JANICE 1.2 NAME 17940 NE 19 AVENUE STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BEACH FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE HAME LEVINE, RALPH 2.2 NAME 2880 NE 203 ST. 1 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3 1 TITLE STAPLE, HOWARD MALAF 3.2 NAME 8901 S OCEAN DR. APT 3 3.3 STREET ADDRESS STREET ADORESS HOLLYWOOD FL 3.4. CfTY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE BERGEN, HERBERT NAME 4. 2 NAME 750 SW 138 AVENUE PLYMOUTH, F0403 STREET ADDRESS 4.3 STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ... Change Addition TITLE 5.1 TITLE NAME BLACK, IRV 5.2 NAME STREET ADDRESS 1351 SW 141 AVE #415 5.3 STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 61 TITLE TITLE

62 NAME

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY+ST-ZIP

RalphLevine

305-931-376

HALAF

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP