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

FILED PROFIT Jan 16 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3)LAMBERTUS & LAMBERTUS, P.A. Principal Place of Business Mailing Address 2929 EAST COMMERCIAL BOULEVARD 2929 EAST COMMERCIAL BOULEVARD SUITE 604 SUITE 604 FORT LAUDERDALE FL 33308 FORT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/14/1987 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0019203 Not Applicable 21 Suite, Apl. #, 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 Trust Fund Contribution Added to Fees 23 28 Country 8. This corporation owes or has paid the current year Intaggible Personal Property Tax due June 30. Yes No Country Zio Zιρ Personal Property Tax due June 30. 24 25 29 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo LAMBERTUS, ARTHUR W. 2929 EAST COMMERCIAL BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 604 83 FORT LAUDERDALE FL 33308 11. Pursuant to the previsions 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE LAMBERTUS, ARTHUR W. 1.2 NAME NAME 2929 E COMMERCIAL BLVD 1.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2 1 TITLE TITLE NAME 2.2 NAMI STREET ADDRESS 2.3 STRELL ADDRESS 2.4 CITY-ST-ZIP CITY - ST - ZIF DELETE Change ___ Addition 3.1 TITLE TOTLE NAME 3.2 NAME 3.3 STHEET ADDRESS STREET ADDRESS 3.4 CITY-ST-7IP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE 4. 2 NAMI NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - 7IP CITY-ST-ZIP DELETE Change Addition SATRUE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CHY-ST-ZIP CITY-ST-ZIP DELETE Change ■ Addition 6.1 INLE TITLE

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 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 j In an attachment with an address.

6.2 NAME

G.3 STREET ADDRESS

NAME

STREET ADDRESS CITY-ST-ZIP

1/7/97

954 771 - 168h