CORF ANNU	ROFIT PORATION AL REPORT <b>996</b>				⊩B Mort tary of St	F STATE				
OCUN Corporation I	MENT #	M4703	0	(5)						
BEST J	ANITORIAL	& SUPPLIES, IN	NC.		1					
incipal Place of Business Maling Address								U AINIA USUN UKUN	01811 810 <b>81 01</b> 1	
3290 NW 29TH ST. Miami FL 33142 US			3290 NW 29TH ST. Miami FL 33142 US				Date Incorporated or Qualified			Renort
							02/23/1987	ed <b>36</b> . D	05/01/19	
Principal Piac	ce of Business		F	Maising Address			4. FEI Number 59-2769491			Applied For Not Applicable
Suite, Apt. #	, etc.		26	Suite, Apt. #, etc.			5. Certificate of Status Desired	. [7]	\$8.7	5 Additional
	···		27							Required
City & State			28	City & State			6. Election Campaign Financing Trust Fund Contribution	g 🗆		00 May Be ed to Fees
Zip	25	Country	29	Zip	30 Cot	intry		Yes No		199.032,
	g, Name and	Address of Current	Regis	tered Agent		81 Name	10. Name and Address of Ne	w Register	ed Agent	
DIAZ, PE	EDRO M.						dress (P.O. Box Number is Not Acce	otableì		
7933 WE	EST DR.					511661 Add	diess (F.O. EXX Neither to Not Noco	proble)		
APT. 92		2444				83				
APT. 92* N. BAY	MLLAGE FL 33  the provisions of diagent, or both	of Sections 607.0502 and the State of Floated	la Sud	h change was authóri.	zed by the :	84 City	oration submits this statement for the and of directors. Thereby accept the	nurrose of	changing its	registered office d agent. Lam
APT. 92' N. BAY !  Pursuant to or registere familiar with GNATURE	MILAGE FL 30 the provisions of diagent, or both in, and accept the	of Societies 607 0502	ia Sud an 607 mathai	n change was guffiori .0505, Florida Statule 행보 최표 역	zed by the s one is a journal of the second	84 City  Experiment of the composition of the compo	land of directors. I hereby accept the	purpose of appointment	changing its as registere	registered offic d agent. I am ORS IN 12
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SIGNATURE:

7-10-96 (305) 635-5550