2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 09, 2005 8:00 am Secretary of State DOCUMENT # \$30959 1. Entity Name 05-09-2005 90295 014 ***150.00 MELAND, RUSSIN, HELLINGER & BUDWICK, P.A. Principal Place of Business Mailing Address 200 S BISCAYNE BLVD 3000 WACHARIA FIN CTR MIAMI FL 33131 200 S BISCAYNE BLVD 3000 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) City & State City & State 4. FEI Number Applied For 65-0340687 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MELAND, MARK S. Street Address (P.O. Box Number is Not Acceptable) 3000 WACHOVIA FINANCIAL CENTER 200 SOUTH BISCAYNE BLVD MIAMI FL 33131 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD ☐ Delete TITLE NAME MELAND, MARK S NAME 200 S BISCAYNE BLVD 2420 STREET ADDRESS STREET ADDRESS 2005 Biscayne BLVD 3000 CITY-ST-ZIP MIAMI FL CITY-ST-ZIP MiAMI, FL 3313) VD ☐ Delete TITLE **◯** Change ☐ Addition RUSSIN, PETER D. 2005 BISCAYN BLVD 3000 STREET ADDRESS 200 S BISCAYNE BLVD 2420 STREET ADDRESS CITY-ST-7IP MIAMI FL CHTY-ST-ZIP MiAMI, FC 3313 THILE ☐ Delete TITLE ☐ Change Addition NAME HELLINGER, ANDREW B NAME STREET ADDRESS 200 S BISCAYNE BLVD 300 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-7IP TITLE ☐ Defete TITLE Change Addition BUDWICH, MICHAEL NAME 200 S BISCAYNE BLVD 3000 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131 CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

MARU

FILED