1996 CORPORATION ANNUAL REPORT

DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
96 OCT -1 PM 4:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V62307 Amended (6)

JAMES INDUSTRIES SOUTH, INC.

Principal Place of Business:
1673 NW 79TH AVE
MIAMI FL 33126
US

Mailing Address:
C/O JAMES INDUESTRIES, INC.
1619 COLONIAL PKWY
INVERNESS IL 60067
US

3. Date Incorporated or Qualified: 09/08/1992
3a. Date of Last Report: 03/21/1995
4. FEI Number: 65-0420615 (Applied For / Not Applicable)
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 1500 NW 79TH AVG.
22 Suite, Apt. #, etc.:
23 City & State: MIAMI FL
24 Zip: 33126 25 Country: US

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent
81 Name: LINA E. RIVERO
82 Street Address (P.O. Box Number is Not Acceptable): 4111 W. 6th CT.
83 HIALEAH, FL
84 City: FL 85 Zip Code: 33126

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) Lina E. Rivero
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
CD ROBERT, JAMES JR 7956 FISHER ISL DR. FISHER ISL FL	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☒ Change ☐ Addition ROBERTS, JAMES JR 1670 PHEASANT TRAIL INVERNESS, IL 60067
PD ANDREU, ALDO 3901 S. OCEAN DR. 3W HOLLYWOOD FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☒ Change ☐ Addition 2 GROVE ISLE DRIVE, APT 402 COCONUT GROVE, FL 33133
D BLOUIN, JOHN 56 CARRIAGE HOUSE LN ORLAND PK IL	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☒ Change ☐ Addition ORLAND PARK, IL 60462
S STASHWICK, JACQUELINE 8154 BROCKTON CT. HANOVER PK IL	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☒ Change ☐ Addition HANOVER PARK, IL 60103
	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☒ Addition T DONALD D. OLSON 308 S ROSE PARK RIDGE, IL 60068
	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 on an attachment with an address.

SIGNATURE: (signature) JOHN R. BLOUIN 4/9/96 (847) 358-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(signature) Jacqueline A. Stashwick JACQUELINE A. STASHWICK 9/25/96