FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 JAN 17 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V50140 (5)

1. Corporation Name
MARK DATA COMMUNICATIONS, INC.

400001385834
-01/20/95--01078--012
****208.75 ****208.75
DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
550 SE 13TH SUITE 205 DANIA FL 33004	550 SE 13TH SUITE 205 DANIA FL 33004

3. Date Incorporated or Qualified: 07/13/1992
3a. Date of Last Report: 03/02/1994

2. Principal Place of Business	2a. Mailing Address
21 550 S.E. 13TH ST	26 550 S.E 13 TH ST
Suite, Apt. #, etc. 22 205	Suite, Apt. #, etc. 27 205
City & State 23 DANIA FLORIDA	City & State 28 DANIA FLORIDA
Zip / Country 24 33004 / 25 BROWARD	Zip / Country 29 33004 / 30 BROWARD

4. FEI Number: 65-0346500 ☐ 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

9. Name and Address of Current Registered Agent

BRYANT, BERNARD
847 NW 119TH ST.
SUITE 205
MIAMI FL 33168

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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] 1-9-95
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		
TITLE	DPS	1.1 TITLE	DPS	☒ Change ☐ Addition
NAME	CORREILA, AMANDA MARY S.	1.2 NAME	CORREIA AMANDA MARY S	
STREET ADDRESS	940 S. SHORE DRIVE	1.3 STREET ADDRESS	550 S.E 13 TH ST #205	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	DANIA FLORIDA 33004	
TITLE	DVT	2.1 TITLE	DVT	☒ Change ☐ Addition
NAME	CORREIA, JOAO GILBERTO	2.2 NAME	CORREIA JOAO GILBERTO	
STREET ADDRESS	940 S. SHORE DRIVE	2.3 STREET ADDRESS	550 S.E 13TH ST #205	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	DANIA FLORIDA 33004	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

1-17-95 NSF

14. I do 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, added or on an attachment with an address.

SIGNATURE: [signature] AMANDA MARY S. CORREIA 1-9-95 305-920-3343
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

011B701 CP