FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 **DIVISION OF CORPORATIONS DOCUMENT #** S20031 (8)HARRY A. PAYTON AND ASSOCIATES, P.A. Principal Place of Business Mailing Address 201 S. BISCAYNE BEVD. 201 S. BISCAYNE BLVD. SUITE 3000 SUITE 3000 MIAMLEL 33131 MIAMI FL 33131 IJŔ 3. Date Incorporated or Qualified 3a. Date of Last Report 12/20/1990 01/31/1995 28. Milling Address 26. Same 🕅 ncipal Pape of Business 4. FEI Number Applied For 65-0234396 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zιρ Country 8. This corporation has liability for intangible tax under s 199.032, 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent B & C CORPORATE SERVICES INC. **MIAMI CENTER, SUITE 3000** 201 SOUTH BISCAYNE BOULEVARD MIAMI FL 33131 11. Pursuant to the provisions of Soctions 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, typed or printed name of registered agent and title if aphicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1. 1 TITLE Change ■ Addition PAYTON, HARRY A. 1.2 NAME 201 SOUTH BISCAYNE BLVD., #3000 STREET ADDRESS 1.3 STREET ADDRESS MIAM! FL CITY-S1-ZiP 1.4 CITY - ST-ZIP DELETE 2 1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - S1 - ZIP 24 CITY-ST-ZIF DELETE 3 1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City-S1-ZiP 34 CITY-ST-ZIP DELE IE 4.1 TITLE Change Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY - ST - ZIP 4 4 CITY - ST - ZIP DELETE 5 1 TIFLE ☐ Change Addition 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CHTY-ST-ZIP 5 4 CITY-ST-ZIP DELETE 6 1 TITLE ☐ Change Addition 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 14. I do hereby certily that the information supplied with this filing s voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further upplemental annual report is furly and accurate and that my signature shall have the same legal effect as if made under receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE: _ SIGNATURE AND TYPED OR POINTED

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certify that the information indicated on this annual report oath; that I am an officer or director of the corporation of appears in Block 12 or Block 13 if changed, or on an a ta