FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Feb 24 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 257361 (6) THE CROMER COMPANY Principal Place of Business Mailino Address 55 N.E. 7TH STREET 55 N.E. 7TH STREET MIAMI FL 33132 MIAMI FL 33132 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/28/1962 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-0971347 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζιρ Ζip Country Country 8. This corporation owes or has paid the current year Intangible Yes □ No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **B & C CORPORATE SERVICE** 81 201 SOUTH BISAYNE BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 3000** 83 **MIAMI FL 33131** City 84 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, typed or printed name of requirered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition CBD TITLE 1.1 TITLE CROMER, MAURICE NAME 1.2 NAME 55 NE 7TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - ST- ZIP 1.4 CITY - ST - ZIP PD DELETE 2.1 TITLE Change Addition TITLE CROMER, DANIEL NAME 2.2 NAME 55 NE 7TH ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 City-St-ZiP DELETE Channe Addition TITLE SD 3.1 TITLE **CROMER, MARILYN** NAME 3 2 NAME 55 NE 7TH ST. STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE Addition 4.1 TITLE TITLE CASSEL, MARWIN S. 4. 2 NAME NAME 201 SOUTH BISCAYNE BLVD SUITE 3000 STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33131** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change ☐ Addition NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 61 TITLE

6.2 NAME

14. Thereby certify that the infortiation 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 annual reprot on supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the converted on the receiver of trustee compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 ipenanged, by on an attaching it with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

NAME STREET ADDRESS

CITY-ST-ZIP

CR2E084 (10/97