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

FILED PROFIT FLORIDA DEPARTMENT OF STATE Feb 03 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 279360 (2)DSA GROUP, INC. Principal Place of Business Mailing Address 2005 PAN AM CIRCLE 2005 PAN AM CIRCLE **TAMPA FL 33607** TAMPA FL 33607 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/10/1964 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1033790 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 П 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the Surrent year Intangible Personal Property Tax due June 30. Yes \square No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BROWN, CARLTON 2005 PAN AM CIRCLE Street Address (P.O. Box Number is Not Acceptable) TAMPA FL 33607 83 84 City 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 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 ☐ DELETE 1.1 TITLE Change Addition NAME BRYANT, KENNETH A. 1.2 NAME 2005 PAN AM CIRCLE STREET ADDRESS 1.3 STREET ADDRESS Tampa Fl CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE SD 2.1 TITLE Change Addition NAME BROWN, CARLTON 2.2 NAME STREET ADDRESS 2005 PAN AM CIRCLE 2.3 STREET ADDRESS CITY - ST - ZIP TAMPA FL 2.4 CETY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME ALEXANDER S. BYRNE 3.2 NAME 2005 PAN AM CIRCLE STREET ADDRESS 3.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE TITLE Change Addition NAME SOFIA C. ROVIRA STREET ADDRESS 2005 PAN AM CIRCLE 4.3 STREET ADDRESS TAMPA FL CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE ☐ DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling 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 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, it on an attrachment with an address.

SIGNATURE:

SIGNATURE:

188. 1978 (8B) 873-1227

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

Change

☐ Addition

CR2E034