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

FILED Feb 25 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 363079 (5) TOTURA AND ASSOCIATES, INC. Principal Place of Business Mailing Address 701 E. COMMERCIAL BLVD P.O. BOX 100009 FT LAUDERDALE FL 33310 FT LAUDERDALE FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/24/1970 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 58-1287381 Not Applicable 21 Suite, Apt. #, etc. Suite, Apl. # etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 **Trust Fund Contribution** Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. ☐ Yes ☐ No 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name TOTURA, DOUGLAS B 701 E. COMMERCIAL BLVD Street Address (P.O. Box Number is Not Acceptable) **SUITE 300** FT. LAUDERDALE FL 33334 **B4** City 85 Zip Code Sections 607 0502 and 607, 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered hoth, in the State of Morida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions? office or registered ag-agent. Lam familiar wi Such change was authorized by the corporation's board of directors. I hereby accepted to 607 0505, Florida Statutes. Registered Agent signature required when reinstaling) 12. FICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1 1 TITLE TOTURA, DOUGLAS B 1.2 NAME NAME -701 E. COMMERCIAL BLVD, #300 STREET ADDRESS 1.3 STREET ADDRESS 33308 FT_LAUDERDALE FL-88334 1.4 City-ST-ZIP CITY-ST-ZIF DELFTE Change Addition TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS

14. Thereby certify that the information 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 report or supplemental annual report is fine 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 conjugration or the receive or trusted encovered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or an attachdent with an address.

54 CITY-ST-ZIP

6.4 CITY - ST - ZIP

6 1 TITLE

62 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS CITY-ST-71P

TITLE

NAME

DELETE

☐ Change

☐ Addition