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

FILED FLORIDA DEPARTMENT OF STATE Jan 28 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (0)465202 TAIL, INC. Principal Place of Business Mailing Address 3300 N.W. 41ST STREET 3300 N.W. 41ST STREET MIAM! FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/19/1974 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1562138 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 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 VARAT, ANDREW 3300 N.W. 41ST STREET Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33142 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition varat, andrew NAME 1.2 NAME 11030 PARADELA ST STREET ADDRESS 1,3 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE SINGER, CHERYL NAME 2.2 NAME 11095 MARIN STREET STREET ADDRESS 2.3 STREET ADDRESS CORAL GABLES FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE TITLE ☐ Change Addition 3.2 NAME 3.3 STREET ADDRESS CITY - ST- ZIP 3.4. CITY-ST-ZIP ☐ DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby 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 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 business exposured to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. Block 12 or Block 13 if changed, or on an attachment SIGNA 1/16/98

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

NAME

CR2E034

Change

Addition