

02221999-90019-027-\$150.00-\$150.00

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| <b>PROFIT CORPORATION</b><br><b>ANNUAL REPORT</b><br><b>1999</b>                                                                                                                                                                                                                                                                                                                                                                                               |                                 | <br><b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Harris</b><br>Secretary of State<br>DIVISION OF CORPORATIONS                                                           |                                                                   | APPLICABLE<br>02 MAR 26 PM 11:11<br>SECRETARY OF STATE<br>TALLAHASSEE, FLORIDA<br> |
| <b>DOCUMENT # 480685</b><br>1. Corporation Name<br><b>BASINI, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                         |                                 |                                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| Principal Place of Business<br>2871 NORTH FEDERAL HIGHWAY<br>FT LAUDERDALE FL 33306                                                                                                                                                                                                                                                                                                                                                                            |                                 | Mailing Address<br>2871 NORTH FEDERAL HIGHWAY<br>FT LAUDERDALE FL 33306                                                                                                                                                                                        |                                                                   |                                                                                                                                                                      |
| DO NOT WRITE IN THIS SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| 2. Principal Place of Business<br>21 Suite, Apt. #, etc.<br>22 City & State<br>23 Zip Country                                                                                                                                                                                                                                                                                                                                                                  |                                 | 2a. Mailing Address<br>26 Suite, Apt. #, etc.<br>27 City & State<br>28 Zip Country                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| 3. Date Incorporated or Qualified<br><b>07/10/1975</b>                                                                                                                                                                                                                                                                                                                                                                                                         |                                 | 4. FEI Number<br><b>59-1610247</b>                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                      |                                 | \$8.75 Additional Fee Required                                                                                                                                                                                                                                 |                                                                   |                                                                                                                                                                      |
| 6. Election Campaign Financing - Trust Fund Contribution <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                              |                                 | \$5.00 May Be Added to Fees                                                                                                                                                                                                                                    |                                                                   |                                                                                                                                                                      |
| 7. This corporation owes the current year Intangible Personal Property Tax. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                |                                 |                                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| 9. Name and Address of Current Registered Agent<br><b>BARBER, GARY S</b><br><b>500 E. BROWARD BLVD.</b><br><b>FT LAUDERDALE FL 33304</b>                                                                                                                                                                                                                                                                                                                       |                                 | 10. Name and Address of New Registered Agent<br>81 Name <b>RICHARD K. INGLIS</b><br>82 Street Address (P.O. Box Number is Not Acceptable)<br><b>2455 EAST SUNRISE BLVD SUITE 320</b><br>83 <b>FT. LAUDERDALE</b><br>84 City <b>FL</b> 85 Zip Code <b>33304</b> |                                                                   |                                                                                                                                                                      |
| 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 <i>[Signature]</i> DATE <b>3/18/99</b>                                                                                                                                                                                                                                                                                                                                                                                                               |                                 |                                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| (NOTE: Registered Agent's signature may be required when registering)                                                                                                                                                                                                                                                                                                                                                                                          |                                 |                                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12                                                                                                                                                                                                              |                                                                   |                                                                                                                                                                      |
| 12. TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <input type="checkbox"/> DELETE | 11. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 12. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 13. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 14. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> DELETE | 21. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 22. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 23. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 24. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> DELETE | 31. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 32. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 33. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 34. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> DELETE | 41. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 42. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 43. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 44. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> DELETE | 51. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 52. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 53. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 54. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |
| TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <input type="checkbox"/> DELETE | 61. TITLE                                                                                                                                                                                                                                                      | <input type="checkbox"/> Change <input type="checkbox"/> Addition |                                                                                                                                                                      |
| NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | 62. NAME                                                                                                                                                                                                                                                       |                                                                   |                                                                                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | 63. STREET ADDRESS                                                                                                                                                                                                                                             |                                                                   |                                                                                                                                                                      |
| CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | 64. CITY-ST-ZIP                                                                                                                                                                                                                                                |                                                                   |                                                                                                                                                                      |

CR2E034 (11/98)

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 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, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *[Signature]* **DATE:** **3-18-99** **PHONE:** **954-565-3756**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #