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

FILED May 04 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 526652 (3)U.S. RESEARCH SERVICE, INC. Principal Place of Business Mailing Address 11900 BISCAYNE BLVD 11900 BISCAYNE BLVD STE 261 STE 261 DO NOT WRITE IN THIS SPACE N.MAMI FL 33181 N.MIAMI FL 33181 3. Date Incorporated or Qualified 02/28/1977 2. Principal Place of Business 2a. Mailing Address Applied For 26 21 59-1750774 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible 25 24 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COHEN, HARVEY S. 11900 BISCAYNE BLVD Street Address (P.O. Box Number is Not Acceptable) STE 261 83 MIAM! FL 33181-9726 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, DELETE CHAIRMAN OF BOARD TITLE Change ☐ Addition COHEN, HARVEY S. NAME 1.2 NAME 1800 N.E. 114TH ST.,2108 STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP THE DELETE 21 TITLE Change Addition NAME COHEN, JEANNE 22 NAME 1800 N.E. 114TH ST.,2108 STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI FL CITY-ST-ZIP 2 4 CITY-ST-ZIP PRESIDENT - DIRECTOR DELETE Prosident 31 TITLE TITLE MINSON BUY TOHNSON NAME 3.2 NAME SWIIOTER 1361 SWILD TER STREET ADDRESS 3.3 STREET ADDRESS 33186 MIAMI FL 33186 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZW DELETE Change Addition TITLE 5.1 TITLE

64 CITY-ST-ZIP 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 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, of on an attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

305388 1121

Change

Addition