

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

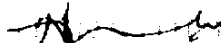
FILED

Jan 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 554171 (9)					
1. Corporation Name LUMINAIRE, INC.					
Principal Place of Business 7300 SW 45TH ST MIAMI FL 33155			Mailing Address 7300 SW 45TH ST MIAMI FL 33155		
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business			3. Date Incorporated or Qualified 10/12/1977		
21. Suite, Apt. #, etc.			4. FEI Number 59-1779022		
22. City & State			Applied For Not Applicable		
23. Zip			5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
24. Country			6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
25. Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		
26. Country			30. Country		
9. Name and Address of Current Registered Agent KASSAMALI, NASIR 7300 SW 45TH STREET MIAMI FL 33155			10. Name and Address of New Registered Agent		
81. Name					
82. Street Address (P.O. Box Number is Not Acceptable)					
83.					
84. City			FL 85. 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's signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE ☐ Change ☐ Addition					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP					
2.1 TITLE ☐ Change ☐ Addition					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE ☐ Change ☐ Addition					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY - ST - ZIP					
4.1 TITLE ☐ Change ☐ Addition					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE ☐ Change ☐ Addition					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE ☐ Change ☐ Addition					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 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 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.

SIGNATURE:

 KASSAMALI, NASIR

01/15/98

CR2E034 (10/97)