## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # 565313 THE GREENLIGHT COMPANY Principal Place of Business Mailing Address 10514 W FLAGLER STR 10514 W FLAGLER STR MIAM! FL 33174 MIAMI FL 33174 3. Date Incorporated or Qualified 3a. Date of Last Report 01/17/1978 02/14/1995 2. Principal Flace of Business 2a. Mailing Address 4. FEI Number Applied For 26 59-1831439 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zφ Zip 8. This corporation has liability for intangible tax under s 199.032, Country 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COBO, FRANCISCO J. 82 Street Address (P.O. Box Number is Not Acceptable) 8590 S.W. 126TH TERRACE MIAMI FL 33156 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstating) CR2E034 (12/95) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE 1.1 TITLE ☐ Change ☐ Addition COBO, FRANCISCO J. 1.2 NAME STHEET ADDRESS 8590 SW 126TH TERRACE 1.3 STREET ADDRESS CITY ST ZIP MIAMI FL 14 CITY - ST-ZIP DELETE 2 1 TITLE ☐ Change ☐ Addition 22 NAME STRUET ADDRESS 2.3 STREET ADDRESS CHY SE-ZIP 24 CITY - ST-ZIP DELFTE 3 1 TITLE ☐ Change ■ Addition 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CHY-ST ZiP 34 CITY ST-ZIP DELE IE 4 1 TITLE Change Addition 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CHY+ST ZIP 4.4 CITY - ST-ZIP

6.4 CITY - ST - ZIP 14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 produced to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address.

5 1 TITLE

52 NAME

6 1 DITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

SIGNATURE:

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OPTESIdent/Secretary

DELETE

DELFTE

March 5, 1996

Change

Change

Addition

Addition