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

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

FILED Feb 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 638680 (9) HARRISON, WITT AND ASSOCIATES CONSULTANTS, INC. Mailing Address Principal Place of Business 8300 SW 102 ST MIAMI FL 33156 8300 SW 102 ST MIAMI FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/05/1979 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 59-1982774 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes 24 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **B1** Name HARRISON, KENNETH 8300 SW 102 STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33156 83 84 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. Familiar with, and accept the objugations of, Section 607.0505, Florida Statutes. HARRISON SL 12. DELETE TITLE 1.1 TITLE Change Addition HARRISON, KENNETH NAME 12 NAME 8300 SW 102 ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI, FL 0 1.4 CITY-ST-ZIP CITY-ST-ZIP DELF1E Change Addition TITLE 2.1 TITLE WITT, RICHARD NAME 2.2 NAME 8300 SW 102 ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI, FL 0 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition THILE 3.1 TITLE 3.2 NAME NAME 3 3 STREFT ADDRESS STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

Kenneth R. HARRISON SR.

14. Thereby 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

5.4 CITY - ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

Addition

☐ Change