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 662089 DOCUMENT # 1. Corporation Name MIDLAND SERVICES, INC. Principal Place of Business Mailing Address 2550 NW 72ND AVE STE 310 5722 S FLAMINGO RD MIAMI FL 33122 COOPER CITY FL 33330 3. Date incorporated or Qualified 3a. Date of Last Report 04/23/1980 04/24/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2003595 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 \Box 27 Fee Required City & State Otv & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ziρ Country Z_{Φ} Country 8. This corporation has liability for intangible tax under s. 199,032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo BALDOCCHI, ARCHIE 82 Street Address (P.O. Box Number is Not Acceptable) 2550 NW 72 AVE #310 **MIAMI FL 33122** 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prioted name of registered agent and title if approache. (NOT): Registered Agent algorature required when rainstaning) 12. OFFICERS AND DIRECTORS CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DELETE 1. 1 TITLE Change Addition BALDOCCHI, ARCHIE NAME 1.2 NAME 2550 NW 72 AVE #310 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIF TITLE DELETE 2 1 TITLE Change Addition BALDOCCHI, PATRICIA NAME 2.2 NAME 2550 NW 72 AVE #310 STREET ADDRESS 2.3 STREET ADDRESS MIAMI, FL 00000 CITY-ST-ZIP 2 4 CHY-\$1 - ZIF TITLE [] DELETE 3 1 THTLE [] Change ☐ Addition BORGONOVO, MAURICO NAME 3.2 NAME 2250 NW 72ND AVE #310 STREET ADDRESS 3.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 34 CHY-ST-ZIP TITLE DELETE 4 1 Hill Change Addition NAME 4.2 NAME STREET AUDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE TT DELETE S. 1 THILE Change Addition NAME 5.2 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIF 5.4 CITY - ST - ZIP TITLE [] DELETE 6 1 THILE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY-S1-ZP 14. I do hereby certify that the information supplied with this filing is vocuntarily 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 finual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if charged if on an attachment with an address.

SIGNATURE: 4 /12/96 1305-361-8554