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

FILED May 15 1998 8:00am PROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (3) APEX ADJUSTMENT BUREAU, INC. Principal Place of Business Mailing Address 6030 HOLLYWOOD BLVD. 6067 HOLLYWOOD BLVD HOLLYWOOD FL 33024 HOLLYWOOD FL 33024 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/22/1980 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2029544 26 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8,75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zφ Country Zψ 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent ROSNER, DAVID N. Name 6067 HOLLYWOOD BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33024 83 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 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** (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE TITLE 1.1 TOLE Change Addition SUTTON, RANDY NAME 1.2 NAME 6067 HOLLYWOOD BLVD. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL CITY - ST - ZIP 1.4 CITY-ST-ZIP Change TITLE DELETE 2.1 TITLE Addition MEARS, MICHELLE NAME 22 NAME 6067 HOLLYWOOD BLVD. STREET ADDRESS 2.3 STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 THILE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELFTE Addition 5.1 TITLE Change TITLE 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Channe Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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 arrival report is supplienental 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 officeration 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:

STREET ADORESS

CITY-ST-ZIP

4/30/98