SECOND INCTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 0, 1986 AMOUNT DUE ON OR REFORE 6/4/NE: \$225 (IF DISSOLVED, INNERMAL AMOUNT DUE TO REMOTATE: \$375 FROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State FILED 1995 DIVISION OF CORPORATIONS 1995 JUL 11 AN 9:32 DOCUMENT # SECRETARY OF STATE PEOPLE IN TRANSIT, INC. TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address 10329 BUENA VENTURA DRIVE 10329 BUENA VENTURA DRIVE **BOCA RATON FL 33498 BOCA RATON FL 33498** DO NOT WRITE IN THIS SPACE. 3a. Date of Last Report 3. Date incorporated or Qualified 10/19/1981 06/15/1994 4. FEI Number Applied For 2a. Malling Address 2. Principal Place of Business 59-2136702 Not Applicable 26 21 Suite, Apt. #, etc. \$8.75 Auditional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country 8. This corporation has liability for intangible tax under s. 199.032, Zip Country Florida Statutes 30 Yos ☐ No 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name EBMEIER, EDWARD Street Address (P.O. Box Number is Not Acceptable) 10329 BUENA VENTURA DRIVE 83 **BOCA RATON FL 33498** 84 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition 1. 1 THIE TITLE EBMEIER, LINDA P 1.2 NAME NAME 10329 BUENA VENTURA DR. 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 1.4 CITY-ST-ZIP CITY-ST-ZIP ប **≯**Change Addition 2.1 TITLE TITLE EBMEIER, EDWARD 22 NAME HALLE 10329 BUENA VENTURA DR. 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change 4 1 TITLE TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF Change Addition 5.1 TITLE TITLE 5.2 HAME NAME **5.3 STREET ADDRESS** STREET ADDRESS 5.4 CITY+ST+ZIP CITY-ST-ZIP Change Addition A 1 TITLE TITLE G.2 NAME HAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 logal effect as if made under eath; 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.

E.L. Ebmereit

0086778