FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 07 1996 8:00 am
Secretary of State

DOCUMENT # **F93000005499 (9)**

1. Corporation Name
CLAYTON GROUP, INC.

Principal Place of Business
9501 HWY 92 EAST
TAMPA FL 33610

Mailing Address
9501 HWY 92 EAST
TAMPA FL 33610

3. Date Incorporated or Qualified: **12/03/1993**
3a. Date of Last Report: **04/19/1995**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: **04-3021921** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WILLIAMS, JAMES C JR
9501 HWY 92 EAST
TAMPA FL 33610

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 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 (Signature of current registered agent if changing the registered agent) (Name of New Registered Agent (Signature required when submitting)) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	☐ DELETE	11 TITLE	✓	☐ Change ☒ Addition
NAME	KANG, JOHN		12 NAME	Oddis, Alvo M.	
STREET ADDRESS	9501 HWY 92 EAST		13 STREET ADDRESS	9501 Hwy. 92 East	
CITY-ST-ZIP	TAMPA FL 33610		14 CITY-ST-ZIP	Tampa FL 33610	
TITLE	PD	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	TOMPKINS, WILLIAM D		22 NAME		
STREET ADDRESS	9501 HWY 92 EAST		23 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33610		24 CITY-ST-ZIP		
TITLE	D	☐ DELETE	31 TITLE		☐ Change ☐ Addition
NAME	CHITAYAT, JACK		32 NAME		
STREET ADDRESS	150 W. 56TH ST.		33 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10019		34 CITY-ST-ZIP		
TITLE	D	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	SALAS, RICARDO A		42 NAME		
STREET ADDRESS	9501 HWY 92 EAST		43 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33610		44 CITY-ST-ZIP		
TITLE	TS	☐ DELETE	51 TITLE		☒ Change ☐ Addition
NAME	WILLIAMS, JAMES C.		52 NAME		
STREET ADDRESS	9501 HWY 92 E		53 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL		54 CITY-ST-ZIP	ZIP 33610	
TITLE		☐ DELETE	61 TITLE	D	☐ Change ☒ Addition
NAME			62 NAME	Dooley, A. Rhew JR	
STREET ADDRESS			63 STREET ADDRESS	4849 CARDINAL DRIVE	
CITY-ST-ZIP			64 CITY-ST-ZIP	Beaumont TX 77705	

CR2E034 (12/95)

14. I 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)(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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: James C Williams Jr — 2/2/96 — (813)626-7786
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
JAMES C. Williams JR