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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL'REPORT Secretary of State DIVISION OF CORPORATIONS 1997 97 JUN 20 MM 7: 1-8 DOCUMENT # **F94000000490** (2) SECRETARY OF STATE TALLAHASSEE FLORIDA AVENT DE MIAMI, INC. Principal Place of Business Mailing Address 3701 E. COLUMBIA ST. 3701 E. COLUMBIA ST. TUCSON AZ 85714-3411 TUCSON AZ 85714-9411 3a. Date of Last Report 3. Date Incorporated or Qualified 02/01/1994 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 11-2162477 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 🔀 No Zip Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 ВЗ 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.050? 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, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required whon reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE Change Addition TITLE 1.17(1).6 MCCAULEY, JAMES T NAME 1.2 NAME 1400 HOLCOMB BRIDGE ROAD STREET ADDRESS 1.3 STREET ADDRESS **ROSWELL GA 30076** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE X Change Addition VD TITLE 21 HILE REVIS, WILLIAM T DODD, JOHN C. 2.2 NAME NAME 3701 E. COLUMBIA ST. 3701 E. COLUMBIA ST. STREET ADDRESS 2.3 STREET ADDRESS TUCSON AZ 85714-3411 CITY-ST-ZIP 2. 4 CITY - ST-ZIP TUCSON, AZ 85714-3411 DELETE Change Addition TITLE D 3.1 TITLE METZ, JOHN S NAME 3.2 NAME 1400 HOLCOMB BRIDGE ROAD STREET ADDRESS 3.3 STREET ADDRESS **ROSWELL GA 30076** CITY-ST-ZIP 3.4. CITY-ST-ZIP □ Change □ □ [12222013**74** --06/24/31--01013---003 TITLE DELETE 4.1 T(TLE Addition MURRAY, DAVID R 4.2 NAME NAME 1400 HOLCOMB BRIDGE ROAD 4.3 STREET ADDRESS STREET ADDRESS ****165.00 ****165.00 **ROSWELL GA 30076** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE GAMRON, W. ANTHONY NAME 5.2 NAME 545 E. JOHN CARPENTER FREEWAY STREET ADDRESS 5.3 STREET ADDRESS IRVING TX 75062 CITY-ST-ZIP 5.4 CITY - S1 - ZIP DELETE A Change TITLE 6.1 TITLE Addition SMITH, CYNTHIA E NAME 62 NAME JOHN D. 1400 HOLCOMB BRIDGE ROAD STREET ADDRESS 6.3 STREET ADDRESS ROSWELL GA 85714-3411 CITY-ST-ZIP CITY-ST-ZIP ROSWELL GA 85714-3411

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 6.4 CITY-ST-ZIP WI 54957 19.07(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 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 chapter or any unad ment with an address.

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(414) 721-2000