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FILED

Apr 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000000510 (6)

1. Corporation Name

BRAEMAR HOLDINGS LTD., COMPANY

Principal Place of Business

11401 BISCAYNE BLVD.  
MIAMI FL 33161-3410

Mailing Address

11401 BISCAYNE BLVD.  
MIAMI FL 33161-3410

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/31/1995

4. FEI Number

98-0149761

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. Yes ☒ No ☐

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEVINE, NORMAN  
11401 BISCAYNE BLVD.  
MIAMI FL 33161-3410

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME *DI-M-N. Management Ltd*

STREET ADDRESS *P.O. BOX 260 N.A.*

CITY-ST-ZIP *TURKS & CAICOS ISLANDS*

TITLE ☐ DELETE

NAME *Timothy P. O'Sullivan*

STREET ADDRESS *P.O. Box 260 N.A.*

CITY-ST-ZIP *TURKS & CAICOS ISLANDS*

TITLE ☐ DELETE

NAME *D*

STREET ADDRESS *TIMOTHY P. O'SULLIVAN, ESQ.*

CITY-ST-ZIP *PO BOX 260, BUTTERFIELD SQ, N/A*

TITLE ☐ DELETE

NAME *PROVIDENCIALES, TURKS & CAICOS, BVI*

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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