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

FILED May 19 1998 8:00am **PROFIT** It ORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name F99632 RONOR CORPORATION Principal Place of Business Mailing Address 3113 S. OCEAN DRIVE STE. 701 3113 S. OCEAN DRIVE STE. 701 HALLANDALE FL 33009 HALLANDALE FL 33009 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/14/1982 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 21 59-2274257 Not Applicable Suite, Apt. #, etc Suite. Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired 22 Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MURRAY, ANGUS 198 NW 79TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) **MIAM! FL 33150** 83 85 Zip Code 84 City 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 familiarly th, and accept the obligations of, Section 607.0505, Florida Statutes. e of registerist agg t and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition □ DELETE TITLE 1.1 TITLE Change JEDWAB, SAM NAME 1.2 NAME CR2E034 3113 S. OCEAN DR. STE. 701 STREET ADDRESS 1.3 STREET ADDRESS HALLANDALE FL 33150 CITY-ST-ZIP 1.4 CHTY - ST - ZIP DELETE 2.1 TITLE Change ___ Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-S1-7IP DELETE Change Addition TITLE 3.1 TITLE NAME STREET ADDRESS 3.3 STREET ADDRESS 34. DITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4,4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE NAME 6.2 NAME 6.3 STREET ADDRESS 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 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.

4/22/00