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

APPROVED AND FILED

1996 JUN -4 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G34613** (1)

1. Corporation Name

ETERNAL LIGHT FUNERAL DIRECTORS AND COUNSELORS, INC.

Principal Place of Business	Mailing Address
17250 W. DIXIE HWY N. MIAMI BEACH FL 33160 US	17250 W. DIXIE HWY N. MIAMI BEACH FL 33160 US

2. Principal Place of Business	2a. Mailing Address
21	26 4126 Norland Avenue
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28 Burnaby, British Columbia
Zip 24 / Country 25	Zip 29 V5G 3S8 / Country 30 Canada

3. Date Incorporated or Qualified: 04/07/1983
3a. Date of Last Report: 04/13/1995
4. FEI Number: 59-2286868 ☐ 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

ROSEN, LAWRENCE N.
133 SEVILLA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name: CT Corporation
82 Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
83
84 City: Plantation FL 85 Zip Code: 33324

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. BARBARA A. BURKE I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Barbara A. Burke SPECIAL ASSISTANT SECRETARY 5/31/96
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	STD	☒ DELETE	1.1 TITLE	D	☐ Change ☒ Addition
NAME	ORITT, MICHAEL		1.2 NAME	Raymond L. Loewen	
STREET ADDRESS	10301 NW 25TH ST		1.3 STREET ADDRESS	4126 Norland Avenue V5G3S8	
CITY-ST-ZIP	MIAMI, FL 00000		1.4 CITY-ST-ZIP	Burnaby, British Columbia, Canada	
TITLE	DP	☒ DELETE	2.1 TITLE	D/Assistant S	☐ Change ☒ Addition
NAME	KAY, KENNETH		2.2 NAME	Peter S. Hyndman	
STREET ADDRESS	640 NE 98TH STREET		2.3 STREET ADDRESS	4126 Norland Avenue V5G3S8	
CITY-ST-ZIP	MIAMI SHORES FL		2.4 CITY-ST-ZIP	Burnaby, British Columbia, Canada	
TITLE	AS	☒ DELETE	3.1 TITLE	P	☐ Change ☒ Addition
NAME	ROLLNICK, NEIL S		3.2 NAME	Kenneth M. Kay	
STREET ADDRESS	133 SEVILLA AVE		3.3 STREET ADDRESS	17250 West Dixie Highway	
CITY-ST-ZIP	CORAL GABLES, FL 00000		3.4 CITY-ST-ZIP	North Miami Beach, Fla 33160	
TITLE		☐ DELETE	4.1 TITLE	V	☐ Change ☒ Addition
NAME			4.2 NAME	Robert D. Russell	
STREET ADDRESS			4.3 STREET ADDRESS	200 N. Federal Highway	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	Pompano Beach, Fla. 33062	
TITLE		☐ DELETE	5.1 TITLE	T/S	☐ Change ☒ Addition
NAME			5.2 NAME	Ken Lee, Jr.	
STREET ADDRESS			5.3 STREET ADDRESS	3190 Tremont Avenue	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Trevose, Pa. 19053	
TITLE		☐ DELETE	6.1 TITLE	Assistant S	☐ Change ☒ Addition
NAME			6.2 NAME	Timothy A. Birch	
STREET ADDRESS			6.3 STREET ADDRESS	50 East River Center Blvd., #820	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Covington, Ky. 41011	

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)(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 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: Kenneth M Kay KENNETH KAY 2/15/96 305/948-9200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #