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

PROFIT May 20 1998 8:00am ELORIDA DEPARTMENT DE STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **19**98 DIVISION OF CORPORATIONS **DOCUMENT #** G45119 (6)B & R LIGHTING, INC. Principal Place of Business Mailing Address 4434 N.W. 35TH COURT 4434 N.W. 35TH COURT MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/27/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2301715 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 25 24 Personal Property Tax due June 30. 29 ☐ Yes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent В1 Name KANELIDIS, NICK B 2400 E COMMERCIAL BLVD **B2** Street Address (P.O. Box Number is Not Acceptable) SUITE 706 83 FT. LAUDERDALE FL 33308 84 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, typind or printed name of registered agent and title it applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE Addition Change 1.1 TITLE KARRER, RICHARD G. NAME 1.2 NAME 7510 COQUINA DR. STREET ADDRESS 1.3 STREET ADDRESS N. BAY VLGE, FL City-St-ZIP 1.4 CITY - ST - ZIP DELI TE TITLE 2.1 TITLE Change Addition KARRER, BARBARA A. NAME 2.2 NAMI 7510 COQUINA DR. STREET ADDRESS 23 STREET ADDRESS N. BAY VLGE. FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Change Addition KARRER, BARBARA A NAME 3.2 NAME 7510 COQUINA DR. STREET ADDRESS 3.3 STREET ADDRESS N. BAY VLGE. FL CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 suppliemental 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 altrachment with an address.

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DARRIVA

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