FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

AMENDED

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JUL -6 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G-63267

1. Corporation Name: FELFER INVESTMENT, INC.

Amended

Principal Place of Business / Mailing Address:
558 Ocean Cay Blvd.
Key Largo, Florida 33037

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: October 3,1983
3a. Date of Last Report: 1995

2. Principal Place of Business
21 558 Ocean Cay Blvd.
Suite, Apt. #, etc. 22
City & State 23: Key Largo, FL.
Zip 24: 33037 Country 25: Monroe

2a. Mailing Address
26 P.O.Box 1683
Suite, Apt. #, etc. 27
City & State 28: Key Largo, FL. 33037
Zip 29: Country 30: Monroe

4. FEI Number: 59-2379620 ☐ 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

Fernandez, Caridad
19200 N.W. 50 Ave
Miami, FL.

10. Name and Address of New Registered Agent

61 Name: Felipe, Juan
62 Street Address (P.O. Box Number is Not Acceptable): 558 Ocean Cay Blvd.
63
64 City: Key Largo **FL** 65 Zip Code: 33037

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] 6/26/95
Signature required of named agent and new agent if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/S/D Fernandez, Caridad 19200 N.W. 50 Ave., Miami, FL.	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☒ Change ☐ Addition D/P/S Felipe, Juan 558 Ocean Cay Blvd. Key Largo,FL. 33037
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/T Felipe, Noel 19200 N,W. 50 Ave., Miami,FL.	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☒ Change ☐ Addition VP/D/T Felipe, Noel 20791 S.W. 240 St. Homestead, FL. 33031
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	400001[illegible] Change ☐ Addition -07/10/95--01010--011 *****61.25 *****61.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

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)(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.

SIGNATURE: [signature] June 26, 1995 305-451-1866
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTOR OR OFFICER — Date — Daytime Phone #

Juan Felipe