FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** (0) JULINE INVESTMENTS, INC. Principal Place of Business Mailing Address 2001 ANDREWS AVENUE 2001 ANDREWS AVENUE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 3. Date incorporated or Qualified 3a. Date of Last Report 11/17/1983 05/23/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2402456 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ 200Country 8. This corporation has liability for intangible tax under s. 199.032 24 25 29 30 Flooda Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name BEILLY, BRADFORD J 82 Street Address (P.O. Box Number is Not Acceptable) 790 E. BROWARD BLVD. SUITE 200 83 FT. LAUDERDALE FL 33301 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,05.02 and 607,15.08, 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 protect uso electrons based agent and two rapids are (NOTE: Registered Agent signal increasived when receden give CR2E034 (12/95) 12 OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE □ DELETE 1 1 HILE Change Addition MCCOY, LARRY W. NAME 1.2 NAM9 2001 ANDREWS AVENUE STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL CITY - ST - ZiP 1.4 CHY+ST-7IP DS THILE DELETE 2.1 1011 Change Addition MCCOY, FAITH NAME 2.2 NAME 2001 ANDREWS AVENUE STREET ADDRESS 2.3 STREET ADDRESS POMPANO BCH, FL 00000 CITY-ST-ZIP 2.4 City - ST 2iP TITLE DELETE 3 1 115 6 Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 City - S* - 7-P DELFTE 4 1 11 TE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 City - ST. 7IF DELETE TITLE 5 I TITLE ☐ Change Add tion NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY - ST - ZIP 54 CITY ST-ZIP [] DELETE TITLE 6.1111.6 Change Addit on NAME 5.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY - ST - Z:P 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 enipowered 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.

D. .

Daylinie Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR