FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
95 FEB -7 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G90724 (7)

1. Corporation Name
SEFCO MANAGEMENT, INC.

Principal Place of Business	Mailing Address
~~2900 WEST SAMPLE RD.~~ ~~STE. 200~~ ~~POMPANO BCH. FL 33073~~	~~2900 WEST SAMPLE RD.~~ ~~STE. 200~~ ~~POMPANO BCH. FL 33073~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/08/1984
3a. Date of Last Report: 02/22/1994

2. Principal Place of Business	2a. Mailing Address
21 2101 W. Commercial Blvd.	26 2101 W. Commercial Blvd.
Suite, Apt. #, etc. 22 Suite 4800	Suite, Apt. #, etc. 27 Suite 4800
City & State 23 Fort Lauderdale, FL	City & State 28 Fort Lauderdale, FL
Zip / Country 24 33309 / 25 USA	Zip / Country 29 33309 / 30 USA

4. FEI Number: 59-2450416 ☐ 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

~~KEHNER, BRUCE W.~~
~~1401 FORUM WAY~~
~~WEST PALM BCH. FL 33401~~

10. Name and Address of New Registered Agent

81 Name: Thomas S. Olesiewicz
82 Street Address (P.O. Box Number is Not Acceptable): 2101 W. Commercial Blvd.
83: Suite 4800
84 City: Fort Lauderdale, FL 85 Zip Code: 33309

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] Title: PRESIDENT (Registered Agent signature required when reinstating) DATE: 1/30/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTMD	1.1 TITLE	☒ Change ☐ Addition
NAME	HOLZMANN, GEORGE	1.2 NAME	
STREET ADDRESS	~~2900 WEST SAMPLE RD.~~	1.3 STREET ADDRESS	2101 W. Commercial Blvd., Suite 4800
CITY-ST-ZIP	~~POMPANO BCH. FL~~	1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33309
TITLE	S	2.1 TITLE	☒ Change ☐ Addition
NAME	HOLZMANN, RUTH CHRISTINE	2.2 NAME	
STREET ADDRESS	~~2900 WEST SAMPLE RD.~~	2.3 STREET ADDRESS	2101 W. Commercial Blvd., Suite 4800
CITY-ST-ZIP	~~POMPANO BCH. FL~~	2.4 CITY-ST-ZIP	Fort Lauderdale, FL 33309
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 added on an attachment with an address.

SIGNATURE: [signature] 2/03/95
SIGNATURE AND TITLE OR PRINTED NAME OF DIRECTOR OR OFFICER
GEORGE HOLZMANN, PRESIDENT

0115222 CP