# 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

APPROVED AND FILED
95 MAY 30 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # G98964 (1)

1. Corporation Name
CENTRAL PRODUCTION SERVICES GROUP, INC

500001504105
-06/02/95--01008--015
****225.00 ****225.00
DO NOT WRITE IN THIS SPACE.

| Principal Place of Business | Mailing Address |
|---|---|
| ~~2110 PALM AVE~~<br>~~HIALEAH FL 33010~~ | ~~2110 PALM AVE~~<br>~~HIALEAH FL 33010~~ |

3. Date Incorporated or Qualified: 02/27/1984
3a. Date of Last Report: 05/01/1994

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 8725 NW 18 TERRACE | 26 8725 NW 18 TERR |
| Suite, Apt. #, etc.<br>22 202 | Suite, Apt. #, etc.<br>27 202 |
| City & State<br>23 MIAMI FL | City & State<br>28 MIAMI FL |
| Zip 24 33172 Country 25 | Zip 29 33172 Country 30 |

4. FEI Number: 59-2376070 ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| MOBLEY, JOHN CARTER<br>~~2110 PALM AVE.~~<br>~~HIALEAH FL 33010~~ | 81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable): 8725 NW 18 TERR<br>83: SUITE 202<br>84 City: MIAMI FL 85 Zip Code: 33172 |

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] Date: 5/1/95

(If changing Registered Agent, Registered Agent's signature required. May be pending.)

| 12. OFFICERS AND/OR DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|---|---|---|---|
| TITLE | DP | 11 TITLE | ☐ Change ☐ Addition |
| NAME | MOBLEY, JOHN CARTER | 12 NAME | |
| STREET ADDRESS | ~~2110 PALM AVE~~ | 13 STREET ADDRESS | 8725 NW 18 TERR |
| CITY ST ZIP | ~~HIALEAH FL~~ | 14 CITY ST ZIP | SUITE 203 MIAMI FL 33172 |
| TITLE | | 21 TITLE | ☐ Change ☐ Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY ST ZIP | | 24 CITY ST ZIP | |
| TITLE | | 31 TITLE | ☐ Change ☐ Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY ST ZIP | | 34 CITY ST ZIP | |
| TITLE | | 41 TITLE | ☐ Change ☐ Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY ST ZIP | | 44 CITY ST ZIP | |
| TITLE | | 51 TITLE | ☐ Change ☐ Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY ST ZIP | | 54 CITY ST ZIP | |
| TITLE | | 61 TITLE | ☐ Change ☐ Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY ST ZIP | | 64 CITY ST ZIP | |

14. I/We 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 of the report or on an attachment with an address.

SIGNATURE: [signature] 5/1/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0070180 CP