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

DOCUMENT # H32330 (3)

1. Corporation Name
SYLVESTER CORPORATION

Principal Place of Business
1460 SE 3 ST
POMPANO BEACH FL 33069
US

Mailing Address
1460 SW 3 ST
POMPANO BEACH FL 33069
US

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/03/1984
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-2478508 — 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

2. Principal Place of Business (21) / Suite, Apt. #, etc. (22) / City & State (23) / (24) / (25)
2a. Mailing Address (26) / Suite, Apt. #, etc. (27) / City & State (28) / (29) / (30)

9. Name and Address of Current Registered Agent

COHEN, MARVIN A.
11060 LAKEVIEW DRIVE
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	COHEN, LOUISE
STREET ADDRESS	1460 SW 3 ST
CITY-ST-ZIP	POMPANO BEACH FL
TITLE	ST
NAME	COHEN, MARVIN A.
STREET ADDRESS	1460 SW 3 ST
CITY-ST-ZIP	POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ 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: Marvin A. Cohen Secty/Treas 4/28/95 305 942-5727
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0112020 CP