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PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **H83569** **(4)**

1. Corporation Name
CONMER ENTERPRISES, INC.

Principal Place of Business	Mailing Address
% CONRAD CHRISTOPHER BABROWSKY 824 TANGIER STREET CORAL GABLES FL 33134	% CONRAD CHRISTOPHER BABROWSKY 824 TANGIER STREET CORAL GABLES FL 33134-2432

3. Date Incorporated or Qualified: 11/01/1985
3a. Date of Last Report: 05/01/1996

2. Principal Place of Business
21: 18110 S.W. 142 PL.
Suite, Apt. #, etc. 22:
City & State 23: MIAMI - FL.
Zip 24: 33177 Country 25: DADE

2a. Mailing Address
26: 18110 S.W. 142 PL.
Suite, Apt. #, etc. 27:
City & State 28: MIAMI, FL.
Zip 29: 33177 Country 30: DADE

4. FEI Number: 65-0219818 ☐ 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
BABROWSKY, MERCEDES
824 TANGIER ST
CORAL GABLES FL 33134-9432

10. Name and Address of New Registered Agent
81 Name: CARMEN ELENA JULIAN
82 Street Address (P.O. Box Number is Not Acceptable): 18110 S.W. 142 PL.
83:
84 City: MIAMI, FL 85 Zip Code: 33177

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: Carmen Elena Julian — Carmen Elena Julian — 04-15-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's 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	PS BABROWSKY, MERCEDES 824 TANGIER STREET CORAL GABLES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P.S. Carmen Elena Julian 18110 SW 142 pl. miami- FL. 33177	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing 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: Carmen Elena Julian — Carmen Elena Julian — 04-15-97 — 383 3649