FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # DENNIS P. KOEHLER, P.A. 300001840543 -05/28/96--01028--025 ***200.08 Principal Place of Business CONGRESS BUSINESS CENTER 1280 N. Congress Ave., Suite 104 W. Palm Beach, FL 33409 3. Date incorporated or Qualified 3a. Date of Last Report 2. Principal Place of Business July 1986 2a. Mailing Address May 1995 21 1280 N. Congress Ave. Applied For 26 Suite, Apt. #, etc. 59-2596075 Not Applicable Suite, Apt. #, etc. 22 Suite 104 5. Certificate of Status Desired \$8.75 Additional 27 SAME City & State Fee Required City & State 6. Election Campaign Financing 23 W. Palm Beach, FL \$5.00 May Be 28 Trust Fund Contribution Country Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, 24 33409 25 USA 29 9. Name and Address of Current Registered Agent 30 Florida Statutes X Yes No 10. Name and Address of New Registered Agent Name Dennis P. Koehler, Esq. same address as above 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City e 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 of accept the obligition of Sorting 607.0505, Florida Statutes. 85 Zip Code 11. Pursuant to the registered agent 12. NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE CR2E034 (12/95) PRESIDENT DELETE 1.171116 SECRETARY NAME Change Addition Dennis P. Koehler 1.2 NAME STREET ADDRESS Gay M. Koehler 1966 Richard Lane 1.3 STREET ADDRESS 1966 Richard Lane CITY-ST-ZIP W. Palm Beach, FL 33406 1.4 C/TY - ST - ZIP W. Palm Beach, FL 33406 SECRETARY DELETE 2. 1 TITLE NAME Change ☐ Addition Gay M. Koehler 2.2 NAME STREET ADDRESS 1966 Richard Lane 2.3 STREET ADDRESS CITY-ST-ZIP W. Palm Beach, FL 33406 2 4 CITY - ST - ZIP TITLE DELETE 3 1 TITLE NAME ☐ Change ☐ Addition 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST-ZIF TITLE DELETE 4. 1 TITLE NAME Change Addition **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 IOUE NAME Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6. 1 TITLE NAME Addition 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 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)(k), Florida Statutes. I further certify that the information indica 3: on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under capable in Block 12 or Block 11 if the handed or completely made under the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name

PASCIAGUE

4/30/96 (407)684-2844 Desyltine Priorie

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