FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Mar 16 1998 8:00am PROFIL FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1) WELCOME REALTY CORP. Principal Place of Business Mailing Address 7261 W. TROON CIRCLE P.O. BOX 2342 MIAMI LAKES FL 33014 HIALEAH FL 33012 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/30/1986 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-2728962 Not Applicable 21 Suite, Apt #, etc. \$8.75 Additional Suite, Apt #, etc 5. Certificate of Status Desired Fee Required 22 City & State City & State 8. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GONZALEZ, RODOLFO F. 7261 WEST TROON CIRCLE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI LAKES FL 33014 83 84 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Brigistered Agent signature required when reinstaling) Signature, speed or pouled came of registered agent and little if applicable CR2E034 (10/97) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE 11 TITEF GONZALEZ, RODOLFO F. NAME 12 NAME 7261 W. TROON CIRCLE 1.3 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE 2.1 TITLE Change TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADORESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition THLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS CITY-\$1-ZIP 5 4 CITY - ST-ZIP Addition DELETE 6 1 TITLE TITLE

> 62 NAME **6.3 STREET ADDRESS**

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

14. I 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 allachment with an address

301-222-3100