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

FILED May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J42417 (2)WITKOP OFFICE MACHINES, INC. Principal Place of Business Mailing Address % JOHN P. WITKOP % JOHN P. WITKOP 3505 GRIFFIN RD 3505 GRIFFIN RD DO NOT WRITE IN THIS SPACE FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312 3. Date Incorporated or Qualified 11/10/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2746696 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Žip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes Personal Property Tax due June 30. 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Bi Name WITKOP, JOHN P 3220 SW 39TH COURT Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33023 83 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, 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typod or printed name of registered agent and title if upplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition PID DELETE 1.1 TITLE TITLE WITKOP, JOHN P. NAME 1.2 NAME **3220 SW 39TH COURT** 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CITY-ST-ZIP 1.4 CITY - ST - ZIP VSD DELETE Change Addition 2.1 TITLE TITLE WITKOP, TERENCE 2.2 NAME 4781 SW 74TH TERRACE 2.3 STREET ADDRESS STREET ADDRESS DAVIE FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3 4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE NAME 62 NAME

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 of 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. 11/12/00 064-11/1/2144

63 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP