May 03, 1999 8:00 am Secretary of State

05-03-1999 90126 091 ***150.00 05-03-1999 90126 092 *****8.75



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **J45269**

1. Corporation Name

MUREX PROPERTIES INC.

Principal Place of Business		Mailing Address			4 1001110 ant aten atten atten		Pri 61611 61911 E	1100 01011 1401	
		6925 112TH CIRCLE SOUTH	RCLE SOUTH		1				
SUITE 101 SUITE 101						DO NOT WRI	TE IN THIS	SDACE	
LARGO FL 34643-5200 LARGO FL 34643-5200						ate Incorporated or Qualifed	IE IN I IIIS	3FACE	
					1 -	2/04/1986			
Principal Place of Business 2a. Mailing Address						El Number		I Ar	plied For
21 26 26					1 '	9-2743670			t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.							\overline{v}	\$8.75	Additional
27					5. 0	ertifcate of Status Desired	А	Fee Re	quired
City & State City & State					6. E	lection Campaign Financing		\$5.00	May Be
23		28				rust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Country		1	his corporation owes the curr	ent year Inta		
24		29 3	10			ersonal Property Tax.		Yes	□No
	9. Name and Address of Current	Registered Agent	81	M	10, N	lame and Address of New F	Registered /	<u>lgent</u>	
GEO	DEVELOPMENT CORP.		81	Name					_
6925 112TH CIRCLE NORTH				Street Add	dress (P.C	D. Box Number is Not Accepta	bie)		
STE. 101									
	GO FL 34643		83						
EARGO FL 34043			84	City			FL	85 Zip (Code
	to the provisions of Sections 607,0502							idea	
l office or n	egistered agent, or both, in the State or m familiar with, and accept the obligat	of Florida. Such change was auti ions of, Section 607.0505, Florid	horized by da Statutes	tne corpora	ition's boar	or directors. I nereby accep	ot the appoir	tment as re	gistered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere				t signature requi			DATE	D DIDEOTC	NDC IN 42
12.	OFFICERS AND DIRECTORS PD DELETE		13. 1.1 TITLE	13.		DITIONS/CHANGES TO OF	FICERS AN	☐ Change	Addition
TITLE	ZIADE, FADY	C. DELETE	1.2 NAME						
NAME				**************************************					
STREET ADDRESS	6925-112TH CRCL.,N.#101 LARGO FL 34643		1.3 STREET	ļ					
CITY-ST-ZIP	LANGO FE 34043	☐ DELETE	1.4 CITY-S' 2.1 TITLE	1-ZIP				Change	Addition
TITLE				2.2 NAME					_
NAME STDEET ADDRESS			2.3 STREET	ADORESS					
STREET ADDRESS	•		2,4 CITY-S	i					
CITY-ST-ZIP TITLE			3.1 TITLE	1-21				☐ Change	☐ Addition
NAME			3,2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY-ST-ZIP			1	3.4. CITY-ST-ZIP					
TITLE			4.1 TITLE					☐ Change	☐ Addition
NAME			4, 2 NAME						
STREET ADDRESS			4,3 STREET	ADDRESS					
CITY-ST-ZIP			4,4 CITY-S						
TITLE		☐ DELETE	5.1 TITLE					☐ Change	☐ Addition
NAME			5,2 NAME						
STREET ADDRESS			5,3 STREET	ADDRESS					
CITY-ST-ZIP			5.4 CITY-\$	r-ZIP					
TITLE		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition

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 of 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 of 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 all attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIRECTOR

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE: 2

NAME

STREET ADDRESS

CITY-ST-ZIP

Krály Ziade