FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY -1 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J67341 (4)

1. Corporate Name
B.A.J. MANAGEMENT, INC.

Principal Place of Business
2100 CONSTITUTION BLVD
SUITE 120
SARASOTA FL 34231

Mailing Address
2100 CONSTITUTION BLVD.
SUITE 120
SARASOTA FL 34231

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: 04/07/1987
3a. Date of Last Report: 10/06/1994

2. Principal Place of Business
21
Suite Apt # or Bldg
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite Apt # or Bldg
27
City & State
28
Zip 29 County 30

4. FEI Number: 59-2797271 — 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. Has corporation had activity, or changes to report since 12/31/92? Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

STEINBERG, HERMAN
2100 CONSTITUTION BLVD.
SUITE 120
SARASOTA FL 34231

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, and 607.1008, 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 the duties and responsibilities of registered agent under Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

D
NAME STEINBERG, HERMAN
~~1359 LANDINGS DRIVE~~
SARASOTA FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

☑ Change ☐ Addition
NAME
4152 MOSS OAK PLACE

☐ Change ☐ Addition
NAME

☐ Change ☐ Addition
NAME

☐ Change ☐ Addition
NAME

☐ Change ☐ Addition
NAME

☐ Change ☐ Addition
NAME

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall serve the same legal effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes; and that I am aware of the penalties for filing a false report with the Department of State.

SIGNATURE: HERMAN B. STEINBERG 4/25/95 813-922-9567

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0330117 CP