CORP ANNUA	NOW: FILING FEE A	FLOSIDA DEPARTA Sandra B. I Secretary DIVISION OF CO	MENT OF STATE Mortham of State		
DOCUM	IENT # J8457 6	6 (4)			
I. Corporation N	ON AND BROOKS, INC.	` ,			
I IVANII I C	NA MAD DIROCKO, IIIO.				
Principal Place of Business Making Arkitiess ** CHRISTOPHER ISSA				T 1001950 DTAT 10111 B1001 B1111 10610 DTV GNAN 61611 B1611 A1611 A1611 A1611 A1611	
21301 POWERLINE RD. #206 BOCA RATON FL 33433		21301 POWERLINE RD. #1 BOCA RATON FL 33433	206	3. Date Incorporated or Qualified 07/28/1987	3a. Date of Last Report 06/22/1995
2. Principal Plac	pe of Business	2a. Maling Address		4. FEI Number	Applied For
1		Suite, Apt. #, etc.		65-0051627	Not Applicable \$8.75 Additional
Suite, Apt #.	, etc.	27		5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
3 Zip 4]	Country 25	Zip	Country 30	8. This corporation has liability for in: Florida Statutes	□ No
	g. Name and Address of Curren	I all a decision and the second and	81 Name	10. Name and Address of New Re	gistered Agent
11. Pursuant to	DRUGA AVE., STE. 305 3ABLES FL 33146 o the provisions of Sections 607 0502 ad agent, or both, in the State of Floring and accept stepological galacies of Sections.	ga. Such change was au⊓onzed io√ 607.0505, Florida Statutes	Alternative and a second second	CA CATON ration submits this statement for the purport of directors. Thereby accept the appoint of the properties of the state of the s	FL 85 Zip Code 33 4 33 hose of changing its registered office intrinent as registered agent. I am
SIGNATURE _	Signarine typed or proted our entropy feet alled	tar attendapplication (IVIII)	Flori terist Agent egoal, referance	ed who are not strage	OATE
5	OFFICERS AN	O DIDECTORS	1		
12.			13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
12. TITLE NAME STREET ADDRESS	DPS ISSA, CHRISTOPHER 21301 POWERLINE RD. #20	[] DELETE	1 17HLE 12 NAME 13 STHEEL ADDRESS	ADDITIONS/CHANGES TO OFFI	
12. TITLE NAME	DPS ISSA, CHRISTOPHER	[] DELETE	1 17HLE 12 NAME	ADDITIONS/CHANGES TO OFFI	
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112. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS ISSA, CHRISTOPHER 21301 POWERLINE RD. #20 BOCA RATON FL T ISSA, CHRISTOPHER	Q DEFETE	1 17HE 12 NAME 13 SCHELL ADDRESS 14 OUTY-ST-ZIP 2 1 THE 2 2 NAME	ADDITIONS/CHANGES TO OFFI	☐ Change ☐ Addition
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CHY-SI-ZIP

14. I do hereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes if 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 changing d. or op an attantional with an address.

SIGNATURE:

SIGNATURE

SIGNATURE