FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # J93991 MARK R. MANCERI, P.A. Principal Place of Business Mailing Address 2929 E COMMERCIAL BLVD SUITE 702 2829 E COMMERCIAL BLVD SUITE 702 FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/21/1987 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0004683 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MANCERI, MARK R. 23277 BOCA CAICA CIR 62 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33433** 83 City 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent algnature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 11 TITLE MANCERI, MARK R. NAME 1.2 NAME 23277 BOCA CHICA CIR. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE MANCERI, MARK R. 22 NAME 23277 BOCA CHICA CIR. 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL** CITY - ST - ZW 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-2W 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE 6 1 TITLE ☐ Addition

14. I hereby certify that the information indicated on this annual report of officer or director of the corporation Block 12 or Block 13 if changed. who this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information the 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 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 ver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

62 NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MARK R. MANCER

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP