2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 13, 2001 8:00 am Secretary of State **DOCUMENT # K51036** 1. Entity Name A-1 MANAGEMENT SERVICES, INC. 04-13-2001 90004 012 ***150.00 Mailing Address Principal Place of Business 3131-INVERRARY-BLVD. 3231 INVERRARY BLVD. SAME PNB-132* LAUDERHILL FL 33319 US 6041 KIMBERLY BlvD., STE. C. LAUDERHILL FL 39318 No. LAUDERDALE, FI 33068 3. Mailing Address 5 Am e 6041 KIMBERLY Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite C Applied For 4. FEI Number City & State 65-0163350 AUDERDALE, FI Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PEREZ. VICTOR F 2231 INVERPARY BLVD., W. 6041 KIMBERLY BLVD. LAUDERHILL FL 33319 Suite C. No. LAUDERDAle, Fl 33068 Street Address (P.O. Box Number is Not Acceptable) Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition PISEC P/D TITLE ☐ Delete TITLE PEREZ, VICTOR F NAME NAME STREET ADDRESS 4762 N.W. 66TH AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33321 Change ☐ Addition Delete TITI F TITLE SOTOMAYOR, MAYDA NAME NAME 1090 SMOKETREE COURT STREET ADDRESS STREET ADDRESS 8121 SW 89TH AVE. WESTON FL 33326 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33173" Change Addition STD Delete TITLE TITLE PEREZ-VILLAR, VICTOR NAME NAME 2278 SW 6 ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33135 CITY-ST-ZIP ☐ Chanoe ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an add

CITY-ST-ZIP

VICTOR PEREZ 4/10/01 954-977-8

STREET ADDRESS

CITY-ST-ZIP

CR2E034 (10/00