FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 24 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 (5)DOCUMENT # K61079 FRIENDLY JOHN, INC. Mailing Address Principal Place of Business P O BOX 440665 2122 NW 7TH AVE. MIAMI FL 33144-6998 MIAMI FL 33127 DO NOT WRITE IN THIS SPACE US 3. Date Incorporated or Qualified 01/26/1989 2. Principal Place of Business 4, FEI Number 2a. Mailing Address Applied For 65-0115818 Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 30 Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name donet, david a. ONE COLUMBUS CENTER SUITE 1450 Street Address (P.O. Box Number is Not Acceptable) 82 ONE ALHAMBRA PLAZA 83 CORAL GABLES FL 33134 Zip Code 84 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. Change Addition DELETE 1.1 TITLE TITLE VERDEJA, GLORIA 1.2 NAME NAME 2122 NW 7TH AVE 1.3 STREET ADORESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE VERDEJA, MARIO NAME 2.2 NAME 2122 NW 7TH AVE. 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIF Addition Change DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE

14. Thereby 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 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 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 an appear of the corporation with an address.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

MARIO S. Vende JAZ/16/98