FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 04 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (8)K64161 SURI, INC. Principal Place of Business Mailing Address 8325 NW 53RD STREET 8325 NW 53RD STREET STE #201-A STE #201-A MIAMI FL 33166 DO NOT WRITE IN THIS SPACE MIAMI FL 33166 3. Date Incorporated or Qualified 02/08/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 10451 N.W.3 65-0103063 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 3166 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name **MARTIN TABOR & ASSOCIATES** 8325 NW 53RD STREET 82 STE #201-A 83 **MIAMI FL 33166** 84 11. Pursuant to the provisions of Sections 607-6502 and 607-6508. Provide 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 Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familia with accept the spligations of Section 607-6505, Florida Statutes. SIGNATURE DATE (NOTE: Rogistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE TABOR, MARTIN A. NAME 1.2 NAME 7320 SW 146TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CiTY-ST-ZIP DELETE Change, Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-\$1-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS COTY-ST-ZIP 4.4 CiTY - ST - ZIP DELETE 5.1 TITLE Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 61 TITLE NAME 6.2 NAME

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 or truspe 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 attachment with an address.

SIGNATURE:

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP