FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

PROFIT FLOMA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 (6)K83896 **DOCUMENT #** Corporation Name DACO CONTROL INC. Mailing Address Principal Place of Business 8550 W. FLAGLER STREET 8550 W. FLAGLER STREET SUITE 111 SUITE 111 MIAMI FL 33144 MIAMI FL 33144 3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1995 04/27/1989 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0113828 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032. Country Country Zip Yes No Florida Statutes 29 30 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) CORDO, DANIA 82 8550 W. FLAGLER STREET 83 #111 Zip Code **MIAMI FL 33144** 85 City 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 curporation's board of directors. Thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12 Addition Change DELETE 1.1016 **PSD** TITLE CR2E034 1.2 NAME CORDO, DANIA NAME 13844 S.W. 14 STREET 1.3 STHEE! ADDRESS STREET ADDRESS 14 CLY-ST-ZIP MIAMI FL CITY - ST - ZIP ☐ Addition ☐ Change T DELETE 2 1 THLE 2.2 M/ME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 City | \$1 - ZiP 017Y - \$1 - 7IP Addition Change [DELETE 3 11 18 THE 3.2 N.ME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 C+*Y+\$1-7P CITY-ST-ZIF ☐ Change Addit on DELETE 1111. TITLE 4.2 N+ME NAME 4.3.S. REE1 ADDRESS STREET ADDRESS 44011 ST-ZIP CITY - ST - ZIP Change Addition [] DELETE 5 1 Mile TITLE 5.2 N/ME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 C:TY - ST - 7.P CITY - ST - ZIP Change Addition DELFIE 6 11 TUE TITLE 6.2 NAML NAME 6.3.5 TREET ADDRESS STREET ADDRESS 64 ('TY - ST 71P 14. I do hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 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 certify that I am an officer or director of the corporation or the receiver or trustee en powered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

DANIA