FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -8 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L49577** **(4)**

1. Corporation Name

THE MARSHALL WOLPER COMPANY

Principal Place of Business	Mailing Address
1 SE THIRD AVE STE - 1200 MIAMI FL 33131 US	1 SE THIRD AVE STE - 1200 MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/13/1990
3a. Date of Last Report: 04/28/1994

2. Principal Place of Business
21: 1546 N.E. QUAYSIDE TER.
22: Suite, Apt. #, etc.
23: City & State: MIAMI FL
24: Zip: 33138-2208
25: Country: USA

2a. Mailing Address
26: SAME AS BLOCK 2
27: Suite, Apt. #, etc.
28: City & State
29: Zip
30: Country

4. FEI Number: 65-0170155 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WOLPER, MARSHALL I
1 SE THIRD AVE
STE - 1200
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name: WOLPER, MARSHALL I.
82 Street Address (P.O. Box Number is Not Acceptable): 1546 N.E. QUAYSIDE TERRACE
83
84 City: MIAMI FL 85 Zip Code: 33138-2208

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: Marshall I. Wolper — 1/15/95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE	PD	☐ Change ☐ Addition
NAME	WOLPER, MARSHALL I	1.2 NAME	MARSHALL I. WOLPER	
STREET ADDRESS	1 SE THIRD AVE / STE 1200	1.3 STREET ADDRESS	1546 N.E. QUAYSIDE TER	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	MIAMI, FL 33138-2208	
TITLE	SD	2.1 TITLE	SD	☐ Change ☐ Addition
NAME	SOLPER, LUCEE	2.2 NAME	WOLPER, LUCEE	
STREET ADDRESS	1 SE THIRD AVE / STE - 1200	2.3 STREET ADDRESS	1546 N.E. QUAYSIDE TERRACE	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	MIAMI, FL 33138-2208	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 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 attachment with an address.

SIGNATURE: MARSHALL I. WOLPER, PRES. Marshall I. Wolper — 1/15/95 — (305) 893-8554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0131748 CP