FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

~~1994~~ 1995

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
1995 MAY -1 PM 2:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name
ALLIOR, INC.

DOCUMENT # L54449 (8)

Mailing Address
~~2460 N. E. 196TH STREET~~
~~MIAMI FL 33180~~
20185 E. COUNTRY CLUB DR #901
AVENTURA, FL. 33180-3050

Principal Place of Business
~~2460 N. E. 196TH STREET~~
~~MIAMI FL 33180~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/02/1990
3a. Date of Last Report: 05/01/1993

2. Mailing Address (21)
2a. Principal Place of Business (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

4. FEI Number: 65-0185382 ☐ 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

7. Nonprofit Exempt from $138.75 Supplemental Fee ☐

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

9. Name and Address of Current Registered Agent

ALESI, FRANK
~~2460 NE 196TH ST~~ 20185 E. COUNTRY CLUB DR #901
~~MIAMI FL 33180~~ AVENTURA, FL. 33180-3050

10. Name and Address of New Registered Agent

01 Name
02 Street Address (P.O. Box Number Is Not Acceptable)
03
04 City FL 05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (TITLE, Registered Agent if appointment was necessary)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	D	11 TITLE	
12 NAME	ALESI, FRANK	12 NAME	
13 STREET ADDRESS	2460 NE 196TH ST	13 STREET ADDRESS	20185 E Country Club dr. #901
14 CITY-ST-ZIP	MIAMI FL	14 CITY-ST-ZIP	AVENTURA, FL 33180-3050
21 TITLE	D	21 TITLE	
22 NAME	MORRIS, FLORENCE	22 NAME	
23 STREET ADDRESS	417 IVES DAIRY ROAD	23 STREET ADDRESS	
24 CITY-ST-ZIP	MIAMI FL	24 CITY-ST-ZIP	
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY-ST-ZIP		34 CITY-ST-ZIP	200001492912
41 TITLE		41 TITLE	~~05/18/95--01011--020~~
42 NAME		42 NAME	****225.00 ****225.00
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY-ST-ZIP		44 CITY-ST-ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY-ST-ZIP		54 CITY-ST-ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	JEA
63 STREET ADDRESS		63 STREET ADDRESS	5-1-95
64 CITY-ST-ZIP		64 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 110.07(3)(k), Florida Statutes. I consent the Division of Corporations from any liability for non-compliance with Section 110.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this report or supplemental requirement is true and accurate and that my signature below constitutes my oath or affirmation thereon made under oath; that I have fulfilled all obligations, conditions and duties properly imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X Frank Alesi
SIGNATURE AND TYPED OR PRINTED NAME OF BIDDING OFFICER OR DIRECTOR
FRANK ALESI — PRESIDENT

Date: JAN 17TH 1995 (305) 932-8288
Daytime Phone #