FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

APPROVED AND FILED
95 MAY -1 PM 4:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M31999** (9)

1. **VERNINVEST, INC.**

Principal Office Address: ~~2300 MUSEUM TOWER 150 WEST FLAGLER STREET MIAMI FL 33130~~

Mailing Address: ~~2300 MUSEUM TOWER 150 WEST FLAGLER STREET MIAMI FL 33130~~

3. 05/13/1986 3a. 05/01/1994

4. FEI Number: 59-2670827 — Applied For / Not Applicable

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

6. $5.00 May Be Added to Fees

2. Principal Office Address: 21: 7241 SW 168 ST; 22: ; 23: Miami, FL; 24: 33157; 25: Dade

2a. Mailing Address: 26: 7241 SW 168 ST; 27: ; 28: Miami, FL; 29: 33157; 30: Dade

9. Name and Address of Current Registered Agent

VERNON, JANE E
7241 SW 168TH ST
MIAMI FL 33157

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code:

12. Current Officers and/or Directors

DP
VERNON, WILLIAM G.
7241 SW 168TH ST
MIAMI FL

DS
VERNON, JANE D.
7241 SW 168TH ST
MIAMI FL

AS
FREED, OWEN S.
150 W. FLAGLER ST.
MIAMI FL

13. Additions/Changes to Officers/Directors

VP
Vernon Jane D.
7241 S.W. 168 ST
MIAMI, FL

SIGNATURE: Williams G. Vernon — Signature and typed or printed name of signing officer or director

4/27/95 — 305-255-7377

0107044 CP

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

DOCUMENT # M32096 (3)

1. Corporation Name
EXCELL LTD., INC

Principal Place of Business	Mailing Address
9301 SW 69 COURT MIAMI FL 33156	9301 SW 69 COURT MIAMI FL 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/15/1986
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

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

4. FEI Number: 59-2691529 — 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	10. Name and Address of New Registered Agent
BEA, JAI WOO 9301 S.W. 69 COURT MIAMI FL 33156	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	[ ] Change [ ] Addition
NAME	ECHEVERRI, JUAN M.	1.2 NAME	
STREET ADDRESS	9301 S.W. 69TH CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	PS	2.1 TITLE	[ ] Change [ ] Addition
NAME	BAE, JAI WOO	2.2 NAME	
STREET ADDRESS	9301 S.W. 69TH CT.	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
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)(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 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: _[signature]_ 3/13/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0169790 CP

FILING FEE AFTER MAY 1 IS $225.00

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

DOCUMENT # M33485 (7)

1. Corporation Name

DRAKE HOMES, INC.

Principal Place of Business: 822 SUNSET DR S, LAKE WORTH FL 33461

Mailing Address: 822 SUNSET DR S, LAKE WORTH FL 33461

95 MAY ... 03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/11/1986
3a. Date of Last Report: 03/28/1994
4. FEI Number: 59-2689091 ☐ 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

2. Principal Place of Business — 21 — Suite, Apt. #, etc. 22 — City & State 23 — Zip 24 — County 25

2a. Mailing Address — 26 — Suite, Apt. #, etc. 27 — City & State 28 — Zip 29 — County 30

9. Name and Address of Current Registered Agent

DRAKE, CHARLES D
822 SUNSET DR S
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	DRAKE, CHARLES D.
STREET ADDRESS	822 SUNSET DR S
CITY-ST-ZIP	LAKE WORTH FL
TITLE	VPDS
NAME	DRAKE, CAROL K.
STREET ADDRESS	822 SUNSET DR S
CITY-ST-ZIP	LAKE WORTH FL
TITLE	VPDS
NAME	MELEAR,LAURA D
STREET ADDRESS	822 SUNSET DR S
CITY-ST-ZIP	LAKE WORTH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

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)(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 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.

CHARLES D. DRAKE
SIGNATURE: Charles D. Drake, Pres. 4-23-95 1-407-582-8431
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0270846 CP