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

SIGNATURE:

SIGNATURE ALTYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** M61861 (4) MINI INVESTMENTS, INC. Principal Place of Business Mailing Address 1200 N.W. 78TH AVENUE. SUITE 400 1200 N.W. 78TH AVENUE, SUITE 400 MIAMI FL 33126 MIAMI FL 33126 3. Date Incorporated or Qualified 3a. Date of Last Report 11/02/1987 05/01/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 06-0014717 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Suite 403 Suite 403 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zφ Country 8. This corporation has liability for intangible tax under s 199.032, Zφ Country Florida Statutes Yes No 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name NORKIN, MURRAY 82 Street Address (P.O. Box Number is Not Acceptable) 1200 N.W. 78 Avenue, Suite 403 1200 N W 78TH AVE. SUITE 400 83 **MIAMI FL 33126** 84 City 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 Signature, typed or printed name of registered again, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE (12/95)12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 X Change DELFTE Addition TITLE 1. 1 TITLE **NORKIN. MURRAY** CR2E034 1.2 NAME NAME 1200 N W 78 AVE, STE 400 1200 N.W. 78 Avenue, Suite 403 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 CHTY-ST-ZIP Change DELETE Addition 2 1 TITLE TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-7IP 24 CITY-ST-ZIP DELETE Change Addition TITLE 3. 1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP DELETE Change Add-tion TITLE 4. 1 TITLE STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHTY - ST - 7IP CITY-ST-ZIP DELETE 5 1 THILE ☐ Change Addition TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-\$1-ZIP DELETE Addition TITLE 6 1 DTLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP Is with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further inual report or supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under poration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the certify that the informationals, that I am an officer iation sur appears in Block 12 d chment with an address. 4/22/96 (305) 592-9412

Date

Daytinic Phone #