FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

SIGNATURE:

Lam an officer or director of the corporation appears in Block 12 or Block 13 in Change

CITY - \$1 - 20P



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 14 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M62338

(2)

HARRISH & COMPANY, INC.

Principal Place of Business Mailing Address 1620 NORTH FEDERAL HIGHWAY 1620 NORTH FEDERAL HIGHWAY HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-2824 3. Date Incorporated or Qualified 3a. Date of Last Report 11/12/1987 04/12/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0122300 21 26 Not Applicable Suite Apt #. etc Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired П 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Žin Country Country 8. This corporation has fiability for intangible tax under s. 199.032, 24 25 29 30 Yes ☐ Nio Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PATEL, RAJESH **1620 NORTH FEDERAL HIGHWAY** 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33020 83 84 City 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 of both. The State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am farm an will array allow obligations of section 607,0505, Florida Statutes. SIGNATURE red Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)PSD TITLE DELETE 1.1 TITLE Change PATEL, RAJESH NAME 1.2 NAME 5100 NORTH HILLS DRIVE STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL C:TY - ST - ZiP 1.4 CITY- ST-2IP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CCTY - ST - ZIP 2 4 CITY-ST-ZIP OELE TE TITLE 3 1 TITLE Change Addition MAVE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS City - ST- ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS C-TY - ST - ZIP 5.4 CITY-ST-ZIP TITLE ___ DELETE 6.1 TITLE Addition NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing 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 of th