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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # M68809

1. Corporation Name

R.D. Moody & Associates, Inc.

Principal Place of Business	Mailing Address
5380 Capital Circle, N.W. Tallahassee, Florida 32303	~~4817 Market Place~~ ~~Tallahassee, Fl 32303~~

3. Date Incorporated or Qualified: 2/18/88

3a. Date of Last Report: 5/1/96

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

2a. Mailing Address
26: 3155 N.W. 77th Avenue
Suite, Apt. #, etc.
27:
City & State
28: Miami, Florida
Zip / Country
29: 33122 30: U.S.A.

4. FEI Number: 59-2871508 ☐ 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

Ronald D. Moody
5380 Capital Circle, NW
Tallahassee, Florida 32303

10. Name and Address of New Registered Agent

81 Name: C T Corporation System
82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. Pine Island Road
83:
84 City: Plantation FL 85 Zip Code: 33324

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: Victoria L. Goldstein Special Asst. Secy VICTORIA L. GOLDSTEIN 4-11-97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	President Ronald D. Moody 5380 Capital Circle, NW Tallahassee, Florida 32303	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Vice President Ismael Perera 3155 NW 77th Avenue Miami, Florida 33122	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Ron Martin 5380 Capital Circle, NW Tallahassee, Florida 32303	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	VP & Treasurer Edwin D. Johnson 3155 NW 77th Avenue Miami, Florida 33122	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Lisa B. Courson 5380 Capital Circle, NW Tallahassee, Florida 32303	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	VP & Asst. Secretary Jose M. Sariego 3155 NW 77th Avenue Miami, Florida 33122	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Corporate Secretary Nancy J. Damon 3155 NW 77th Avenue Miami, Florida 33122	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Director Jorge Mas 3155 NW 77th Avenue Miami, Florida 33122	☐ Change ☒ Addition 4/14/97
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	400002142794 -04/15/97--01001--015 ****165.00 ****165.00	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do 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 a 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: Nancy J. Damon — Nancy J. Damon, Corporate Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #