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
95 MAY -1 AM 10: 05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M84093 (7)

1. Corporation Name
MANAGEMENT HOLDING COMPANY

Principal Place of Business	Mailing Address
3250 MARY ST MIAMI FL 33133 US	C/O GREENBERG TRAURIG ATTN DAVID KENIN 1221 BRICKELL AVE MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/02/1988
3a. Date of Last Report: 04/13/1994
4. FEI Number: 65-0100150 — 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	2a. Mailing Address
21	26 3250 Mary Street
Suite, Apt. #, etc 22	Suite, Apt. #, etc 27 Suite 500
City & State 23	City & State 28 Miami, Florida
Zip 24 / Country 25	Zip 29 33133 / Country 30 USA

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TWAITS, ALAN, R 3655 NW 87TH AVE. MIAMI FL 33178	81 Name ARVIN PELTZ, ESQ. 82 Street Address (P.O. Box Number is Not Acceptable) 3250 Mary Street, Suite 500 83 84 City Miami, FL 85 Zip Code 33133

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCP	11 TITLE	☐ Change ☐ Addition
NAME	WEISER, SHERWOOD	12 NAME	
STREET ADDRESS	3250 MARY ST	13 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	14 CITY ST ZIP	
TITLE	D	21 TITLE	VP, Asst. S ☐ Change ☒ Addition
NAME	LEFTON, DONALD E	22 NAME	
STREET ADDRESS	3250 MARY ST	23 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	24 CITY ST ZIP	
TITLE	PVP	31 TITLE	VP, S, T ☒ Change ☐ Addition
NAME	TEMLING, W PETER	32 NAME	
STREET ADDRESS	3250 MARY ST	33 STREET ADDRESS	
CITY ST ZIP	MIAMI FL	34 CITY ST ZIP	
TITLE		41 TITLE	VP ☐ Change ☒ Addition
NAME		42 NAME	PETER L. SIBLEY
STREET ADDRESS		43 STREET ADDRESS	3250 MIAMI ST.
CITY ST ZIP		44 CITY ST ZIP	MIAMI, FL
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
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 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 the 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: Peter L. Sibley — 4/27/95 — (305) 445-2493
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0128069 CP