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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 21 1997 8:00am

Secretary of State

0343152

Secretary of State
DIVISION OF CORPORATIONS

| | 1997 | | | | | |
|--|---|--|--|---|--|---|
| DOCUN 1. Corporation | MENT # M9796 | 4 (4) | | | | |
| TOMAS | L. HEINE, INC. | | | |), \$1511 \$7511 \$ 1611 6 14 | ur #1811 Billio 1881 |
| | | | | | | |
| Principal Place | | Mailing Address | | I SOBSEZ SY 172 IDNIN 1980 BIRN BILL | I MIMIT MIMIT DIQUE DEC | (EL MIMIL MIDEL FAMI |
| 23072 L'ERMIT. | | PO BOX 276183 BOCA RATON FL 3342 | 27-6183 | | | |
| BOCA RATON | FA 33433 | U\$ | | 3. Date Incorporated or Qualified | 3a. Date of L | ast Report |
| 00 | | | | 09/02/1988 | 05/23/18 | |
| —າ ^າ າ`. | ace of Business | 28. Mailing Address | K276185 | 4. FEI Number 65-0061667 | | Applied For Not Applicat |
| rt メタンフ Suite, Apt i | | 26 Suite, Apt. #, etc. | K 2 . 2102 | | \$8 | .75 Additional |
| 22 | | 27 | | Certificate of Status Desired | F | ee Required |
| City & State | | 28 State | las PZ | Election Campaign Financing Trust Fund Contribution | | 5.00 May Be dded to Fees |
| Zip _ | Country | Zio | Country | 8. This corporation has liability for | intangible tax un | , |
| 3.34 | | 28 3342 | | | Yes No | |
| | 9. Name and Address of Currer | nt Registered Agent | 81 Name | 10. Name and Address of New Re | gistered Agent | |
| | NE, TOM L 72 L'ERMITAGE CIR | | | drage (D.O. Day Mymbor in Not Appendix | blo) | |
| | CA RATON FL 33433 | | 82 Street Add | dress (P.O. Box Number is Not Acceptal | DIB) | |
| - | | | 83 | | | |
| | | | 84 City | | FL 85 | Zip Code |
| | | | 1 1 | | | |
| 11 Duranti | to the previous of Sections 607.050 | 2 and 607 1608 Florida St | atutes the above named co | reporation submits this statement for the | auronee of chang | ning ite registeri |
| 11. Pursuant t | to the provisions of Sections 607.050 egistered agent, or both, in the State | 2 and 607.1508, Florida Sta of Florida. Such change w | alutes, the above-named cor as authorized by the corpora | progration submits this statement for the ation's board of directors. I hereby acce | purpose of chang pt the appointme | ging its registeri ent as registered |
| office or re agent. Lar | to the provisions of Sections 607.050 egistered agent, or both, in the State or familiar with, and accept the obligi | 22 and 607.1508, Florida Sta of Florida Such change wa ations of, Section 607.0505 | atutes, the above-named col as authorized by the corpora Florida Statutes | rporation submits this statement for the patients board of directors. I hereby acce | purpose of chan- ipt the appointme | ging its registers ant as registered |
| office or re agent 1 ar SIGNATURE | to the provisions of Sections 607.050 egistered agent, or both, in the State on familiar with, and accept the obligations. Specially, by the state of registered age | of Florida. Such change wa ations of, Section 607.0505 | atutes, the above-named co as authorized by the corpora Florida Statutes | ation's board of directors. I hereby acce | pt the appointme | ent as registered |
| office or reagent. Lar SIGNATURE. | egistered agent, or both, in the State or familiar with, and accept the obligi Styrature, typed or pentrd name of registered age OFFICERS AN | of Florida. Such change wa ations of, Section 607.0505 int and title if applicable | as authorized by the corpora , Florida Statutes NOTE: Registered Agent signature requests. | ation's board of directors. I hereby acce | DATE CERS AND DIRE | ent as registered |
| office or reagent. Lar SIGNATURE. | egistered agent, or both, in the State or familiar with, and accept the obligation Stgradur, typed or pented name of registered age OFFICERS AN | of Florida. Such change wa ations of, Section 607.0505 int and title if applicable. | as authorized by the corpora Florida Statutes. NOTE Registered Agent signature requirements. 13. 1.1 TILE | ation's board of directors. I hereby acce | pt the appointme | ent as registered |
| office or reagent. I are SIGNATURE. 12. TITLE NAME | egistered agent, or both, in the State on tamiliar with, and accept the oblig. Signature typed or pented name of registered age OFFICERS AN PD HEINE, TOMAS L. | of Florida. Such change wa ations of, Section 607.0505 int and title if applicable | as authorized by the corpora Florida Statutes. NOTE Registered Agent signature req 13. 1.7 TILE 1.2 NAME | ation's board of directors. I hereby acce | DATE CERS AND DIRE | ent as registered |
| office or reagent 1 are SIGNATURE 12. TITLE NAME STREET ADDRESS | egistered agent, or both, in the State of tamiliar with, and accept the obligi- Signature, typed or penind name of registered age OFFICERS ANI PD HEINE, TOMAS L 23072 L'ERMITAGE CIRCLE | of Florida. Such change wa ations of, Section 607.0505 int and title if applicable | as authorized by the corpora , Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS | ation's board of directors. I hereby acce | DATE CERS AND DIRE | ent as registered |
| office or reagent. I are SIGNATURE. 12. TITLE NAME | egistered agent, or both, in the State of tamiliar with, and accept the oblig. Signature typed or penied name of registered age OFFICERS ANI PD HEINE, TOMAS L 23072 L'ERMITAGE CIRCLE BOCA RATON FL | of Florida. Such change wa ations of, Section 607.0505 int and title if applicable | as authorized by the corpora Florida Statutes. NOTE Registered Agent signature req 13. 1.7 TILE 1.2 NAME | ation's board of directors. I hereby acce | DATE CERS AND DIRE | CTORS IN 12 |
| office or riagent 1 ar agent 1 ar SIGNATURE. 12. 117LE NAME STREET ADDRESS CHY-ST-ZIP | egistered agent, or both, in the State of tamiliar with, and accept the obligi- Signature, typed or penind name of registered age OFFICERS ANI PD HEINE, TOMAS L 23072 L'ERMITAGE CIRCLE | of Florida, Such change wations of, Section 607.0505 intend tale if applicable (D. DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE | CTORS IN 12 |
| office or riagent 1 av agent 1 av SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIF TITLE | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida, Such change wations of, Section 607.0505 intend tale if applicable (D. DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE Registered Agent signature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE | ation's board of directors. I hereby acce | DATE CERS AND DIRE | CTORS IN 12 |
| Office or riagent 1 av agent 1 av SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the State of tamiliar with, and accept the oblig. Signature typed or penind name of registered agri OFFICERS ANI PD HEINE, TOMAS L 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M | of Florida Such change wations of, Section 607.0505 Initiand title if applicable (D DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE Registered Agent signature required. 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS (CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| office or riagent 1 ar agent 1 ar signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida, Such change wations of, Section 607.0505 intend tale if applicable (D. DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE Registered Agent eignature requirements 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE | ation's board of directors. I hereby acce | DATE CERS AND DIRE | CTORS IN 12 Tange Addit |
| Office or riagent 1 av agent 1 av SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initiand title if applicable (D DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE: Registered Agent eignature required to the second second second required to the second second representation of the second register and the second representation of the second register and representation of the second register and regi | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS (CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| Office or riagent 1 ar agent 1 ar | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initiand title if applicable (D DIRECTORS DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS (CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| Office or riagent 1 ar agent 1 ar | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initiand title if applicable (D DIRECTORS DELETE | as authorized by the corpora , Florida Statutes. NOTE: Registered Agent eignature required to the second second second required to the second second representation of the second register and the second representation of the second register and representation of the second register and regi | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS (CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| Office or riagent 1 are agent 1 are seen 1 a | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initial tile if applicable (D DIRECTORS DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature requirements 13, 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| Office or riagent 1 ar agent 1 ar | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initial tile if applicable (D DIRECTORS DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 nance Addit |
| office or ri agent 1 ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Intrind title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 STREET ADDRESS 4.4 CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 nance Addit nance Addit |
| office or ri agent 1 ai SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE NAME TITLE TITLE TITLE | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Initial tile if applicable (D DIRECTORS DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature req 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS CERS CERS CERS CERS CERS CERS CERS | CTORS IN 12 Tange Addit Trange Addit |
| office or ri agent 1 ar SIGNATURE 12. TITLE NAME STHEEL ADDRESS CITY-ST-ZIP TITLE NAME STHEEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Intrind title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 nance Addit nance Addit |
| Office or ri agent 1 ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Intrind title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Agent eignature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 nance Addit nance Addit |
| Office or riagent 1 ar agent 1 ar | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Int and title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 NAME 5.5 STREET ADDRESS 5.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 Tange Addit Trange Addit Trange Addit |
| Office or riagent 1 are agent 2 are agent | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Intrind title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 Tange Addit Trange Addit Trange Addit |
| Office or raggert 1 are agent 1 are agent 1 are services of the services of th | egistered agent, or both, in the State on tamiliar with, and accept the oblig operation. Speed or printed name of registered age OFFICERS AND PD HEINE, TOMAS L. 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE | of Florida Such change wations of, Section 607.0505 Int and title if applicable (D DIRECTORS) DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apent eignature regi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 NAME 5.5 STREET ADDRESS 5.4 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CO | CTORS IN 12 Tange Addit Trange Addit Trange Addit |
| Office of ragget 1 are agent 2 | egistered agent, or both, in the State or tamiliar with, and accept the oblig Signature, typed or pented name of registered age OFFICERS AN PD HEINE, TOMAS L 23072 L'ERMITAGE CIRCLE BOCA RATON FL STD HEINE, LORENA M 23072 L'ERMITAGE CIRCLE BOCA RATON FL | of Florida Such change wations of, Section 607.0505 Intrind title if applicable (D DIRECTORS) DELETE DELETE DELETE DELETE | as authorized by the corpora , Florida Statutes NOTE: Registered Apena eignature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP 6.5 TITLE 6.5 NAME 6.5 STREET ADDRESS 6.5 CITY-ST-ZIP | ation's board of directors. I hereby acce | DATE CERS AND DIRE CERS AND CH | CTORS IN 12 Tange Addit Thange Addit Thange Addit Thange Addit Thange Addit |