FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
'95 MAR 15 AM 11: 16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002734 (1)

1. Corporation Name
BUSINESS, INC.

Principal Place of Business	Mailing Address
7320 S.W. 65TH AVENUE MIAMI FL 33143	7320 S.W. 65TH AVENUE MIAMI FL 33143

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/27/1994
3a. Date of Last Report:
4. FEI Number: 59-0867423 — 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
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 12225 S. W. 102nd Ct	26 12225 S. W. 102nd Ct
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Miami, Florida	28 City & State: Miami, Florida
24 Zip: 33176 — 25 Country: USA	29 Zip: 33176 — 30 Country: USA

9. Name and Address of Current Registered Agent

SMATHERS, RALPH
7320 S.W. 65TH AVENUE
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name: W. J. Callahan, CPA
82 Street Address (P.O. Box Number is Not Acceptable): 9999 N. E. 2nd Avenue, Suite 200
83
84 City: Miami Shores FL 85 Zip Code: 33138

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 W J Callahan — W. J. Callahan — March 1, 1995
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	PD	1.1 TITLE	PD ☒ Change ☐ Addition
NAME	JONES, RAYMOND	1.2 NAME	Pamela W. Marmin
STREET ADDRESS	9955 N.W. 116TH WAY	1.3 STREET ADDRESS	6043 N. W. 167th St., A-17
CITY-ST-ZIP	MIAMI FL 33178	1.4 CITY-ST-ZIP	Miami Lakes, FL 33015
TITLE	STD	2.1 TITLE	☐ Change ☐ Addition
NAME	RIGG, MATT	2.2 NAME	
STREET ADDRESS	2730 S.E. 3RD AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33129	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	D ☒ Change ☐ Addition
NAME	MARMIN, PAMELA	3.2 NAME	Raymond Jones
STREET ADDRESS	8043 N.W. 167TH ST., SUITE A-17	3.3 STREET ADDRESS	9955 N. W. 116th Way
CITY-ST-ZIP	MIAMI LAKES FL 33015	3.4 CITY-ST-ZIP	Miami, Florida 33178
TITLE	D	4.1 TITLE	D ☒ Change ☐ Addition
NAME	AKINS, TERRY	4.2 NAME	Nadine Floyd
STREET ADDRESS	6065 N.W. 167TH STREET	4.3 STREET ADDRESS	5201 Ravenswood Road, Suite 110
CITY-ST-ZIP	MIAMI LAKES FL 33015	4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33312-6004
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	LYNN, RICHARD	5.2 NAME	
STREET ADDRESS	816 N.W. 11TH STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33136	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	D ☒ Change ☐ Addition
NAME	WEINGARDEN, RON	6.2 NAME	Rick Mitchell
STREET ADDRESS	601 S.W. 8TH STREET	6.3 STREET ADDRESS	2511 Ponce de Leon Boulevard
CITY-ST-ZIP	MIAMI FL 33130	6.4 CITY-ST-ZIP	Coral Gables, Florida 33134

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 this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Pamela W. Marmin — 3/1/95 — 305-556-6022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Pamela W. Marmin, President

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