**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 17 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P15576 (2) STANLEY S. KLUSNER CORP. Principal Place of Business Mailing Address 10275 COLLINS AVENUE 10275 COLLINS AVENUE DO NOT WRITE IN THIS SPACE BAL HARBOUR,F L. 33154 BAL HARBOUR F L. 33154 3. Date Incorporated or Qualified 08/12/1987 2. Principal Place of Business 2a. Mailing Address Applied For 13-2539229 Not Applicable 21 Suite, Apt #, etc Suite, Apl. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible ☐ No Yes | 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name FEINMAN, STEVEN A. 2122 HOLLYWOOD BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 HOLLYWOOD FL 33020 83 84 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, 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 Signifians, typed or predections is of togistioned agreed and tibe if applicable (NOTE Registered Agent signature required when reinstating DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE KLUSNER, STANLEY S. MALIE 12 NAME CR2E034 10275 COLLINS AVENUE 1.3 STREET ADDRESS STREET ADDRESS BAL HARBOUR FL CITY-\$1-ZIP 1.4 CITY-ST-ZiP Addition DELETE Change TITLE STD 2.1 TITLE KLUSNER, PHYLLIS 22 NAME 10275 COLUNS AVENUE STREET ADORESS 2.3 STREET ADDRESS **BAL HARBOUR FL** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3 1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE TITLE 5.1 YITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5 4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME

6.3 STREET ADDRESS

98 (305)8616957

6.4 CITY - ST - ZIP 4. I 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 of true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the accurate the processing of the corporation or the accurate the processing of the corporation or the accurate appears in Block 12 or Block 13 if changed, or on art attachment play in address.

STREET ADDRESS

SIGNATURE: