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

FILED PROFIT Mar 24 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (5) AINSLEY CRESCENT CORPORATION Principal Place of Business Mailing Address 6440 NORTH BAY RD 6440 NORTH BAY RD. MIAMI BEACH FL 33141-4516 MIAMI BEACH FL 33141-4516 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/12/1991 2. Principat Place of Business 2a. Mailing Address 4. FEI Number Applied For 13-5616089 21 Not Applicable 26 Suite, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Ζφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ No 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SOUAID, ROBERT G. 6440 NORTH BAY RD. Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH FL 33141 83 84 City 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 Signature, typed or printed name of registered agent and tice if applicable (NOTE Registered Agont a gnature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. VSD __ DELETE Change ___ Addition 1.1 TITLE TITLE SOUAID, GEORGE NAME 1.2 NAME 1111 CRANDON BLVD.#B1201 STREET ADDRESS 1.3 STREET ADDRESS KEY BISCAYNE FL CiTY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE D 2.1 TITLE Change Addition SOUAID. GEORGETTE NAME 2.2 NAME 1111 CRANDON BLVD. #B1201 STREET ADDRESS 2.3 STREET ADDRESS KEY BISCAYNE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE SOUAID, ROBERT G. NAME 3.2 NAME 6440 NORTH BAY RD. STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6.1 TITLE 6.2 NAME NAME

6.3 STREET ADDRESS

2/11/90

6.4 CITY-ST-ZIP

14. 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 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 of the receiver or trustee empawayed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

STREET ADDRESS

Block 12 or Block 13 if char

DITY-ST-ZIP