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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -4 PM 1:41

DOCUMENT # P93000003599 (6)

1. Corporation Name
PORTVIEW CORPORATION

Principal Place of Business	Mailing Address
668 EDGEWATER DRIVE DEERFIELD BEACH FL 33442	668 EDGEWATER DRIVE DEERFIELD BEACH FL 33442

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/15/1993
3a. Date of Last Report: 03/28/1994
4. FEI Number: 65-0381627 — 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 3975 NW 23rd Terr	26 3975 NW 23rd Terr
22 Suite, Apt #, etc.	27 Suite, Apt #, etc.
23 City & State: Boca Raton, FL	28 City & State: Boca Raton, FL
24 Zip: 33431 — 25 Country: Palm Beach	29 Zip: 33431 — 30 Country: Palm Beach

9. Name and Address of Current Registered Agent

BOYLE, JOHN M
668 EDGEWATER DRIVE
DEERFIELD DRIVE FL 33442

10. Name and Address of New Registered Agent

81 Name: John M. Boyle
82 Street Address (P.O. Box Number is Not Acceptable): 3975 NW 23rd Terr
83
84 City: Boca Raton FL 85 Zip Code: 33431

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 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	D	1.1 TITLE	☒ Change ☐ Addition
NAME	BOYLE, JOHN M	1.2 NAME	
STREET ADDRESS	668 EDGEWATER DRIVE	1.3 STREET ADDRESS	3975 NW 23rd Terr
CITY ST ZIP	DEERFIELD BEACH FL 33442	1.4 CITY ST ZIP	Boca Raton, FL 33431
TITLE	PT	2.1 TITLE	☒ Change ☐ Addition
NAME	BOYLE, EVELYN K	2.2 NAME	
STREET ADDRESS	668 EDGEWATER DR	2.3 STREET ADDRESS	3975 NW 23rd Terr
CITY ST ZIP	DEERFIELD BCH FL	2.4 CITY ST ZIP	Boca Raton, FL 33431
TITLE	VS	3.1 TITLE	☒ Change ☐ Addition
NAME	BOYLE, TRACY L	3.2 NAME	
STREET ADDRESS	668 EDGEWATER DR	3.3 STREET ADDRESS	3975 NW 23rd Terr
CITY ST ZIP	DEERFIELD BCH FL	3.4 CITY ST ZIP	Boca Raton, FL 33431
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY ST ZIP		4.4 CITY ST ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY ST ZIP		5.4 CITY ST ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY ST ZIP		6.4 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 this 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: [signature] Director — 1/17/95 — 407 479 4728
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0094249 CP