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

APPROVED AND FILED

95 APR 25 AM 8:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000027873 (7)

1. Corporation Name
USF OF SOUTH FLORIDA, INC.

Principal Place of Business	Mailing Address
9130 SOUTH DADELAND BLVD. SUITE 1612 MIAMI FL 33156	9130 SOUTH DADELAND BLVD. SUITE 1612 MIAMI FL 33156

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/15/1993
3a. Date of Last Report: 03/23/1994

2. Principal Place of Business	2a. Mailing Address
21 10462 NW 31 terr	26 10462 NW 31 terr
Suite, Apt. #, etc. 22 - - - -	Suite, Apt. #, etc. 27 - - - -
City & State 23 Miami, Fl	City & State 28 Miami, Fl
Zip / Country 24 33172 / 25 Dade	Zip / Country 29 33172 / 30 Dade

4. FEI Number: 65-0414835 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TABOR, MARTIN 9130 S. DADELAND BLVD. STE. 1612 MIAMI FL 33156	81 Name: Tabor, Martin 82 Street Address (P.O. Box Number is Not Acceptable): 10462 NW 31 terr 83 - - - - 84 City: Miami FL 85 Zip Code: 33172

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] 4/20/95
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	DPST	11 TITLE	DPST	☑ Change ☐ Addition
NAME	TABOR, MARTIN A	12 NAME	Tabor, Martin A.	
STREET ADDRESS	9130 S. DADELAND BLVD., SUITE 1612	13 STREET ADDRESS	10462 NW 31 terr	
CITY-ST-ZIP	MIAMI FL 33156	14 CITY-ST-ZIP	Miami, Fl 33172	
TITLE		21 TITLE		☐ Change ☐ Addition
NAME		22 NAME		
STREET ADDRESS		23 STREET ADDRESS		
CITY-ST-ZIP		24 CITY-ST-ZIP		
TITLE		31 TITLE		☐ Change ☐ Addition
NAME		32 NAME		
STREET ADDRESS		33 STREET ADDRESS		
CITY-ST-ZIP		34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 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)(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 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] President 4/20/95 (305) 471-7778
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Martin A. Tabor

0107360 CP