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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 05 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P93000034978 (5)

JARTED FINANCIAL CORP.

Principal Place of Business Mailing Address 1035 NORTHEAST 125TH STREET 1035 NORTHEAST 125TH STREET STE. 320 DO NOT WRITE IN THIS SPACE NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 3. Date Incorporated or Qualified 05/13/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 26 65**-04** 19890 Suite, Apt. #, etc. Suito, Apt. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Žψ Country Country 8. This corporation owes or has paid the current year intangible Yes Yes ☐ No 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent GALPERN, JOEL 1035 NE 125TH ST STE 320 Street Address (P.O. Box Number is Not Acceptable) **NORTH MIAMI FL 33161** 83 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, typort or poeted name of registered agent and to elif applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE ☐ Addition Change TITLE 1.1 TITLE GALPERN, JOEL NAME 12 NAME 1035 NORTHEAST 125TH STREET, STE. 320 STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI FL 33161 CITY-ST-ZIP 1.4 CITY - ST - 7/P DELETE Change Addition TITLE 2.1 TITLE WAYNER, STEPHEN NAME 2.2 NAME 1035 NORTHEAST 125TH STREET. STE. 320 STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI FL 33161 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change DELETE TITLE 3.1 TITLE ☐ Addition 3.2 NAME STREET ADDRESS 3 3 STREFT ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP DELETE Change Addition TITLE 4.1 HTLE 4. 2 NAME 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 6.1 TITLE TITLE

14. Thereby 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 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 changes, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CHY-ST-7/P