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CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000050812 (5)**

1. Corporation Name

D.O.P. INVESTMENTS, INC.

Principal Place of Business	Mailing Address
3694 W. OAKLAND PARK BLVD. LAUDERDALE LAKES FL 33311	3694 W. OAKLAND PARK BLVD. LAUDERDALE LAKES FL 33311

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/15/1993
3a. Date of Last Report: 08/02/1994

2. Principal Place of Business	2a. Mailing Address
21 8360 W Oakland Park Blvd	26 8360 W Oakland Park Blvd
Suite, Apt. #, etc. 22 201	Suite, Apt. #, etc. 27 201
City & State 23 Sunrise, FL	City & State 28 Sunrise, FL
Zip 24 33351 Country 25 USA	Zip 29 33351 Country 30 USA

4. FEI Number: 65-0435181 ☐ 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. 199.022, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MREJEN, ARIE (P.A.) 1333 S. UNIVERSITY DRIVE SUITE 240 PLANTATION FL 33324	81 Name: ARIE MREJEN P.A. 82 Street Address (P.O. Box Number is Not Acceptable): 8360 WEST OAKLAND PARK BLVD. 83 SUITE 307 84 City: SUNRISE FL 85 Zip Code: 33351

11. Pursuant to the provisions of Section 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] BY: ARIE MREJEN PRESIDENT 3/13/95
(If changing Registered Agent, Registered Agent must sign) (If changing Registered Agent, Registered Agent must sign) DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '95
TITLE D NAME KADOCH, DAVID STREET ADDRESS 1250 NW 124TH AVENUE CITY-ST-ZIP PLANTATION FL	☐ Change ☐ Addition
TITLE D NAME HORESH, OURI STREET ADDRESS 5343 N.W. 106 DR. CITY-ST-ZIP CORAL SPRINGS FL	☒ Change ☐ Addition
TITLE D NAME FOUR, ISRAEL STREET ADDRESS 12700 N. BISCAYNE BLVD, #202 CITY-ST-ZIP NORTH MIAMI FL	D ZOUR, ISRAEL 12700 N BISCAYNE BLVD, #202 NORTH MIAMI, FL 33181 ☒ Change ☐ Addition
TITLE D NAME DJERASSI, GIDEON STREET ADDRESS 8800 S.W. 4TH ST. CITY-ST-ZIP PLANTATION FL	D DJERASSI, GIDEON 8800 S.W. 4TH STREET PLANTATION, FL ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this report is complete, accurate and does not qualify for the exemptions 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 above, or on an attachment with an address.

SIGNATURE: [signature] GIDEON DJERASSI DIRECTOR 4.17.95 305 749 2030
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL — Title — Date — Daytime Phone #

0220087 CP