FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # P9300054,635 LAND Experts, Inc. 700001840227 -05/28/96--01021--016 ***208.75 Principal Place of Business Mailing Address 4476 Ascot Circle N. SAME Surasot4, F1. 34235 3. Date Incorporated or Qualified 3a. Date of Last Report 7/29/1993 2. Principal Place of Business 2a. Mailing Address Applied For 65-043045 **2**6 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, 29 ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent CA-los Beauff 4476 Ascot Circle W. 10. Name and Address of New Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) Sarasota, F1. 34235 83 84 City 85 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 697.0505, Florida Statutes. April 30, 1996 (NOTE: Registered Agent signature ERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIBLE President + Secretary [] DELETE 1.1 1011. ☐ Change Addition CAMIOS BERUFF NAME 1.2 NAME CR2E034 4476 ASCOT CINCEN. STREET ADDRESS 1.3 STREET ADDRESS Sarasota, Fl. 34235 CITY-ST-ZIP 1.4 C/TY+ST-Z/P DELETE 2 1 TITLE Change Addition 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CHTY-S1-ZIP DELETE ■ Addition TITLE Change 3 1 TITLE NAME 3.2 NAME STREE1 ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3 4 CiTY - ST - ZiP DELETE Change TITLE Addition 4 1 TITLE NAME 4.2 NAME STREE1 ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5. 1 TITLE NAME 5.2 NAME STREE1 ADDRESS 5.3 STREET ADDRESS CITY- \$1-7IP 5.4 CITY - ST- ZIP TITLE DELETE 6 1 111LE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Ido 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 certify 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 Statutos; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY- ST- ZIP

SIGNATURE:

CITY-ST-7IP

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