FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 96 DEC -2 AH 8:31 1996 **DIVISION OF CORPORATIONS DOCUMENT #** P93000064930 (9) SECRETARY OF STATE DOCKS & DECKS FOREVER, INC. Principal Place of Business Mailing Address 3901 NW 79TH AVE 3901 NW 79731-AVE SLITE 140 MASSI FL 33166 SUITE LIO MARIE FL 33166 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 8340 58 8340 65-0442885 NW 58 St 21 Not Applicable Suite, Apt. #, etc. Suite. Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired П 22 Fee Required \$5.00 May Be City & State City & State 6. Election Campaign Financing Fe, - Mi Am Trust Fund Contribution 23 Mi AM Added to Fees 331CE Country 8. This corporation has liability for intangible tax under s 199,032. 3166 30 Florida Statutes ☐ Yes ***5**20% 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Re-81 Name LEWIS. EDGAR E 82 Street Address (P.O. Box Number is Not Acceptable) KEITH, MACK, LEWIS, COHEN & LUMPKIN 83 200 S. BISCAYNE BLVD., #2000 MAMI FL 33131 84 86 Zip Code City 11. Pursuant to the efficiency of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, 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 triples copy of change agent, I am familiar with triples copy of change agent. I am familiar with triples copy of change agent. 11-27-96 SIGNATURE (NOTE: Registered Agent egnature required when reinstating) d name of registered egent and title if epplicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 No. 12. OFFICERS AND DIRECTORS 13. TI' ☐ DELETE 1.1 TITLE Change Addition PRINZ, ADALBERTO NAME 12 NAME 4480 NW 93RD DORAL CT. REET ADDRESS 1.3 STREET ADDRESS MAM FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TIRE LACHAISE, CHRISTIAN 22 NAME NAME 5108 NW 106TH AVE STREET ADDRESS 2.1 STREET ANNAESS 800002019148---4 MAM FL CITY-ST-ZIF 24 CITY-ST-ZIP DELETE TITLE 3.1 TITLE 3.2 NAME NAME 3.3. STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 4.11ME 42 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-7/P CITY - ST - ZIP DELETE TITLE 5. 1 TITLE Change ... Addition NAUJE 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 6.1 TITLE NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarity furnished and does not qualify for the exemption stated in certify that the information indicated on this annual report or supplemental annual report is true and socurate and that my signature she cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapappears in Block 12 or Block 13 if chapped, or on an attachment with an address.

WHILE RECEILECHASE