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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000066109

1. Corporation Name

RANDEX ENTERPRISES, INC.

Principal Place of Business Mailing Address C/O SCUTILLO & BLAKE C/O SCUTILLO & BLAKE 8000 N UNIVERSITY DRIVE 8000 N UNIVERSITY DRIVE DO NOT WRITE IN THIS SPACE FORT LAUDERDALE FL 33321-2118 FORT LAUDERDALE FL 33321-2118 3. Date incorporated or Qualifed 09/01/1993 2a. Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 65-0437883 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired *-* □ Fee Required 27 22 City & State 6. Election Campaign Financing \$5.00 May Be City & State П Trust Fund Contribution Added to Fees 23 28 Country Country Zip 8. This corporation owes the current year Intangible Zip Yes Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent SCUTILLO, BARRY C Street Address (P.O. Box Number is Not Acceptable) 82 C/O SCUTILLO & BLAKE 8000 N UNIVERSITY DRIVE 83 FORT LAUDERDALE FL 33321-2118 85 Zip Code 84 City

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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change ☐ DELETE 1.1 TITLE TITLE MILIAN, TONY 1.2 NAME NAME 8000 N UNIVERSITY DRIVE 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33321-2118 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Change ☐ Addition 2.1 TITLE TITLE MILIAN, JUDITH D 2.2 NAME NAME 8000 N UNIVERSITY DRIVE 2.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33321-2118 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change □ DELETE 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TIT) F 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change ☐ Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I hereby 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 changed, or on a attachment with an address, with all other like empowered.

SIGNATURE

FILED

Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90050 012 ***150.00

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