FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

DOCUMENT # P93000076579 (0)

APPROVED AND FILED

95 MAY 19 AM 10: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1.
SYMMETRY, INC.

7340 NW 1 ST
#203
PLANTATION FL 33317

Mailing Address:
7340 NW 1 ST
#203
PLANTATION FL 33317

3. 11/01/1993

3a. 05/01/1994

4. 65-0447382

5. $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. ✓

9. Name and Address of Current Registered Agent

FATTA, MARK
7340 NW 1 ST
#203
PLANTATION FL 33317

10. Name and Address of New Registered Agent

FL

11.

12.
PD
FATTA, MARK
7340 NW 1 ST #203
PLANTATION FL 33317

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

✓
Cheryl Newberry
7340 NW 1 St. #203
Plantation, FL 33317

14.

SIGNATURE: Mark Fatta
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/95 (305) 581 7522

0227426 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 12 AM 10:15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000077406 (5)

1. Corporate Name

CSM, INC.

Principal Place of Business: 128 LAKE MARIAM RD. WINTER HAVEN FL 33884

Mailing Address: P.O BOX 2691 WINTER HAVEN FL 33884

3. Date Incorporated: 11/04/1993

3a. Date of Last Report: 04/15/1994

4. FEI Number: 59-3208321

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

STERBA, WILLIAM G
128 LAKE MARIAM RD.
WINTER HAVEN FL 33884

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL
85 Zip Code

11. SIGNATURE

12. OFFICERS AND DIRECTORS

Title	Name and Address
D	STERBA, WILLIAM C 128 LAKE MARIAM RD. WINTER HAVEN FL 33884
D	STERBA, CLARICE E 128 LAKE MARIAM RD. WINTER HAVEN FL 33884
D	DIOGARDI, CYNTHIA L 2429 LAKE MCDADE CT. APOPKA FL 32703

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I hereby certify that the information supplied with this filing is true and accurate.

SIGNATURE: William G Sterba PRESIDENT 5/14/95 (813) 324-2278

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM G STERBA

0318520 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

1995 MAY 15 PM 10: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000077949 (4)

FLORIDA EXPRESS BUS LINES, INC.

Principal Place of Business	Mailing Address
1666 KENNEDY CAUSEWAY SUITE 701 N. BAY VILLAGE FL 33141	1666 KENNEDY CAUSEWAY SUITE 701 N. BAY VILLAGE FL 33141

3. 11/10/1993 3a. 08/23/1994

4. 65-0450134

5. Certificate of Status Desired $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

8. The corporation has liability for intangible tax under ... Florida Statutes. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

QUINTANA, FLORENTINO
665 N.E. 178TH STREET
N. MIAMI BEACH FL 33162

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of ... 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. ... Florida Statutes.

SIGNATURE Florentino Quintana FLORENTINO QUINTANA 4-29-95

12. OFFICERS AND DIRECTORS

Title	Name / Address
TITLE	D
NAME	DA SILVA, WALMIR CARDOSO
STREET ADDRESS	1666 KENNEDY CAUSEWAY, SUITE 701
CITY-ST-ZIP	N. BAY VILLAGE FL 33141
TITLE	D
NAME	QUINTANA, FLORENTINO
STREET ADDRESS	665 N.E. 178TH STREET
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33162
TITLE	D
NAME	CANNON, LUZ MARINA
STREET ADDRESS	1666 KENNEDY CAUSEWAY, SUITE 701
CITY-ST-ZIP	N. BAY VILLAGE FL 33141

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

14. I hereby certify that the information supplied with this filing ... Florida Statutes ...

SIGNATURE: Florentino Quintana FLORENTINO QUINTANA 4-29-95 868-6779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0428510 FP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

[illegible] AM 10: 15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000078771 (1)

1. Corporation Name

HATFIELD HOUSE, INC.

Principal Place of Business
4840 S FEDERAL HWY
FT PIERCE FL 34982

Mailing Address
4840 S FEDERAL HWY
FT PIERCE FL 34982

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/08/1993	3a. Date of Last Report: 07/15/1994
4. FEI Number: 65-0456130	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. 199.032 Florida Statutes	Yes / No

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) Country (25)	Zip (29) Country (30)

9. Name and Address of Current Registered Agent

RICARDO, HERBERT P
4840 S FEDERAL HWY
PORT ST LUCIE FL 34982

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 617.0502, 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

12. OFFICERS AND DIRECTORS

TITLE	PSD
NAME	RICARDO, HERBERT P
STREET ADDRESS	4840 S FEDERAL HWY
CITY-ST-ZIP	FT PIERCE FL

13. ADDITIONS / CHANGES TO OFFICERS AND DIRECTORS

(Change / Addition)

14. I do 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)(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 an attachment with an address.

SIGNATURE: HERBERT P. RICARDO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0379830 CP