AMENDED

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED

95 JUL -6 PM 1:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001531111

DOCUMENT # P93000080774 (6)

1. Corporation Name

PYRAMID VENTURES, INC.

Principal Place of Business	Mailing Address
1580 NW 2ND AVE SUITE 9 BOCA RATON, FL 33432	1580 NW 2ND AVE. SUITE 9 BOCA RATON, FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 01/01/94
3a. Date of Last Report: 05/01/95

2. Principal Place of Business
21: 804 PROSPERITY FARMS RD
22 Suite, Apt. #, etc.: UNIT #1
23 City & State: North Palm Beach, FL
24 Zip: 33408
25 Country: Palm Beach

2a. Mailing Address
26: P.O. Box 12111
27 Suite, Apt. #, etc.:
28 City & State: LAKE PARK, FL
29 Zip: 33403
30 Country: Palm Beach

4. FEI Number: 65-0570643 ☐ 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

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ALLAN M. RUDD
1180 South Powerline Rd
Suite 207-209
Pompano Beach, FL 33069

10. Name and Address of New Registered Agent

81 Name: CHARLES FERGUSON
82 Street Address (P.O. Box Number is Not Acceptable): 804 PROSPERITY FARMS RD #1
83:
84 City: North Palm Beach FL 85 Zip Code: 33408

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: _____ Charles Ferguson 7/3/95
Signature, typed or printed name of registered agent (and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P, D	1.1 TITLE	P, D	☒ Change ☐ Addition
NAME	CHARLES E. FERGUSON	1.2 NAME	CHARLES E. FERGUSON	
STREET ADDRESS	804 PROSPERITY FARMS RD #1	1.3 STREET ADDRESS	804 PROSPERITY FARMS RD #1	
CITY-ST-ZIP	North Palm Beach, FL 33408	1.4 CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE	V/CFO	2.1 TITLE	V/CFO	☐ Change ☐ Addition
NAME	ALLAN M. RUDD	2.2 NAME	ALLAN M. RUDD "DELETE"	
STREET ADDRESS	1580 NW 2ND AVE, #9	2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON, FL 33432	2.4 CITY-ST-ZIP		
TITLE		3.1 TITLE	S	☐ Change ☒ Addition
NAME		3.2 NAME	JOANN FERGUSON	
STREET ADDRESS		3.3 STREET ADDRESS	804 PROSPERITY FARMS RD #1	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	North Palm Beach, FL 33408	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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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: _____ 7/3/95 (407) 564-5546
SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR — Date — Daytime Phone #

0084830 OP