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
95 MAY -1 AM 10:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000001478430
-05/08/95--01028--020
****200.00 ****200.00
DO NOT WRITE IN THIS SPACE

DOCUMENT # P94000002182

1. Corporation Name
GROUP ENTERPRISES, INC.

Principal Place of Business
2671 Riverside Dr #3
Coral Springs, FL 33065

Mailing Address
6265 West Sample Road
Coral Springs, FL 33067

3. Date Incorporated or Qualified: Jan. 3, 1994
3a. Date of Last Report:

2. Principal Place of Business
21 2671 Riverside Dr #3
Suite, Apt #, etc 22 3
City & State 23 Coral Springs, FL
Zip 24 33065 Country 25 BROWARD

2a. Mailing Address
26 6265 West Sample Road
Suite, Apt #, etc 27 123
City & State 28 Coral Springs, FL
Zip 29 33067 Country 30 BROWARD

4. FEI Number: 65-0463060 ☐ 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

9. Name and Address of Current Registered Agent
KURLAND AND KURLAND, P.A.
9853 Pines Blvd
Pembroke Pines, FL 33024

10. Name and Address of New Registered Agent
81 Name: LAW OFFICES OF MICHAEL BERAHA
82 Street Address (P.O. Box Number is Not Acceptable): Suite 204, 6100 Glades Road
83 Boca Raton, FL
84 City: FL
85 Zip Code: 33434

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 [signature] Michael Beraha 4/21/95
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	PRESIDENT	1.1 TITLE	☐ Change ☐ Addition
NAME	ELYSE GREENE	1.2 NAME	
STREET ADDRESS	2671 Riverside Dr #3	1.3 STREET ADDRESS	
CITY ST ZIP	Coral Springs, FL 33065	1.4 CITY ST ZIP	
TITLE	SECRETARY	2.1 TITLE	☐ Change ☐ Addition
NAME	VIDALINA VICTORIA ORTIZ	2.2 NAME	
STREET ADDRESS	2671 Riverside Dr #3	2.3 STREET ADDRESS	
CITY ST ZIP	Coral Springs, FL 33065	2.4 CITY ST ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY ST ZIP		3.4 CITY ST ZIP	
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	

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)(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 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: [signature] Elyse Greene, President 4/12/95 (305) 345-1904
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #