FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS P94000006110 (8) **DOCUMENT #** POWRPAD SOUTHERN, INC. Principal Place of Business Mailing Address 13410 SW 16TH COURT 13410 SW 16TH COURT DAVIE FL 33325 DAVIE FL 33325 Date Incorporated or Qualified 01/26/1994 2. Principal Place of Business 1080 NW 53 5t. Mailing Address 1080 NW 53 St.

11 H. Lowderdale FL 33307 26 Ft. Lawrence FL ???? Pt. Lawlerdale FL 33309 65-0463109 Applied For Not Applicable Surte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City's State
Ft-handerdale FL 6. Election Campaign Financing Landordale FL \$5.00 May Be 23  $\Box$ Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199 032, Broward 24 29 Florida Statutes ☐ Yes ☐ No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent NARCUS, DEBORAH 82 Street Address (P.O. Box Number is Not Acceptable) 13410 SW 16TH COURT DAVIE FL 33325 83 84 City 85 Zip Code 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 familiar with, and accept the obligations of Section 607.0505, Florida Statutes LAW RENCE D. NARCUS April 26, 1996 hawrence), Narcus - Treasurer Signature, typed or praited have of reget settaged and their applicate. 12. CR2E034 (12/95) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELF 16 Change Addition NARCUS, DEBORAH NAME 1.2 NAM( 13410 SW 16TH COURT STREET ADDRESS 1.3 STREET ADDRESS. **DAVIE FL 33325** CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELETE 2 1 TITLE Addit on NARCUS, LAWRENCE D NAME 2.2 NAME 13410 SW 16TH COURT STREET ADDRESS 2.3 STREET ADDRESS DAVIE FL 33325 CITY - ST - ZIP 2.4 CITY - ST - ZIF TITLE [ DELETE 3 1 THELE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4 CITY - ST- ZIP TITLE DELETE 4 1 7 TLF Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 fifte Change Addition NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 CITY - ST - ZIP TULE DELETE 6 1 THLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ACCRESS CHTY-ST-ZIP 64 CITY - S? - Z/P 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.

however D. Noveus

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

SIGNATURE: