

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
May 19 1998 8:00am  
Secretary of State

|                                                       |                                                                                   |                                                                                                           |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| PROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1998</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|-------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

DOCUMENT # P94000011469 (1)

1. Corporation Name

VALDES-FAULI CORPORATE SERVICES, INC.

Principal Place of Business

2 S. Biscayne Blvd.  
Suite 3400  
Miami, Florida 33131

Mailing Address

2 S. Biscayne Blvd.  
Suite 3400  
Miami, Florida 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1994

4. FEI Number

65-0475120

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

500002530995

-05/21/98--01006--030

84 City

\*\*\*150.00

FL

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 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 Required for each change of registered office or registered agent.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | P/D                             | <input type="checkbox"/> DELETE |
| NAME           | Valdes-Fauli, Raul E.           |                                 |
| STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                 |
| CITY-ST-ZIP    | Miami, Florida 33131            |                                 |

|                    |                                 |                                                                              |
|--------------------|---------------------------------|------------------------------------------------------------------------------|
| 1.1 TITLE          | V                               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.2 NAME           | Fernandez-Quincoces, Guillermo  |                                                                              |
| 1.3 STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                                                              |
| 1.4 CITY-ST-ZIP    | Miami, Florida 33131            |                                                                              |

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | V/T/D                           | <input type="checkbox"/> DELETE |
| NAME           | Scheer, Mark J.                 |                                 |
| STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                 |
| CITY-ST-ZIP    | Miami, Florida 33131            |                                 |

|                    |                               |                                                                              |
|--------------------|-------------------------------|------------------------------------------------------------------------------|
| 2.1 TITLE          | V                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 2.2 NAME           | Platner, Michael G.           |                                                                              |
| 2.3 STREET ADDRESS | 500 E. Broward Blvd., #1400   |                                                                              |
| 2.4 CITY-ST-ZIP    | Ft. Lauderdale, Florida 33394 |                                                                              |

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | D/V                             | <input type="checkbox"/> DELETE |
| NAME           | Valdes-Fauli, Raul J.           |                                 |
| STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                 |
| CITY-ST-ZIP    | Miami, Florida 33131            |                                 |

|                    |                              |                                                                              |
|--------------------|------------------------------|------------------------------------------------------------------------------|
| 3.1 TITLE          | V                            | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 3.2 NAME           | Beall, Jr., Kenneth S.       |                                                                              |
| 3.3 STREET ADDRESS | 777 S. Flagler Dr., #500     |                                                                              |
| 3.4 CITY-ST-ZIP    | W. Palm Beach, Florida 33401 |                                                                              |

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | D/V                             | <input type="checkbox"/> DELETE |
| NAME           | Bischoff, Richard J.            |                                 |
| STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                 |
| CITY-ST-ZIP    | Miami, Florida 33131            |                                 |

|                    |                                 |                                                                              |
|--------------------|---------------------------------|------------------------------------------------------------------------------|
| 4.1 TITLE          | V                               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 4.2 NAME           | Higgins, Jim                    |                                                                              |
| 4.3 STREET ADDRESS | 800 S.E. Monterey Commons Blvd. |                                                                              |
| 4.4 CITY-ST-ZIP    | Stuart, Florida 34996           |                                                                              |

|                |                                 |                                 |
|----------------|---------------------------------|---------------------------------|
| TITLE          | D/V                             | <input type="checkbox"/> DELETE |
| NAME           | Vazquez-Bello, Clemente L.      |                                 |
| STREET ADDRESS | 2 S. Biscayne Blvd., Suite 3400 |                                 |
| CITY-ST-ZIP    | Miami, Florida 33131            |                                 |

|                    |                                 |                                                                              |
|--------------------|---------------------------------|------------------------------------------------------------------------------|
| 5.1 TITLE          | V                               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME           | Page, Stephen C.                |                                                                              |
| 5.3 STREET ADDRESS | 800 S.E. Monterey Commons Blvd. |                                                                              |
| 5.4 CITY-ST-ZIP    | Stuart, FL 34996                |                                                                              |

|                |                          |                                 |
|----------------|--------------------------|---------------------------------|
| TITLE          | D/V                      | <input type="checkbox"/> DELETE |
| NAME           | Mitrione, Michael V.     |                                 |
| STREET ADDRESS | 777 S. Flagler Dr. 500   |                                 |
| CITY-ST-ZIP    | West Palm Beach, Florida |                                 |

|                    |                              |                                                                              |
|--------------------|------------------------------|------------------------------------------------------------------------------|
| 6.1 TITLE          | V                            | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME           | Hart, Kenneth M.             |                                                                              |
| 6.3 STREET ADDRESS | 777 S. Flagler Dr., #500     |                                                                              |
| 6.4 CITY-ST-ZIP    | W. Palm Beach, Florida 33401 |                                                                              |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
MARK J. SCHEER

4/23/98 (305) 376-6040

CR2E034 (10/97)

*pg 2 of 2*

Supplemental Information  
Officers and Directors

Valdes-Fauli Corporate Services, Inc.

ADDITIONS

|                 |                          |
|-----------------|--------------------------|
| Title:          | Vice-President           |
| Name:           | Vogelsang, Stephen       |
| Street Address: | 777 S. Flagler Dr., #500 |
| City,St,Zip:    | W. Palm Beach, FL 33401  |