SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P94000016455 (5) DOCUMENT # DOJO, INC. Mailing Address Principal Place of Business 2750 SW 26TH AVE 2750 SW 26TH AVENUE UNIT D LINIT D **MIAMI FL 33133** 3a. Date of Last Report MIAMI FL 33133 Date Incorporated or Qualified US 02/28/1994 05/01/1995 Applied For 4 FEI Number 2a, Mailing Address Principal Place of Business 2. Not Applicable 65-0487062 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #. etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199 032 Country Country Zip Zip Yes No Florida Statutes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 PERETS, MARC 2750 SW 28TH AVE 82 UNIT D 83 MIAMI EL 33133 85 84 607.0502 and 607.4508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered fie State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered the florida Statutes. 11. Pursuant to the provisions of Sections office or registered agent, or both agent I am fantiliar with, and SIGNATURE (NOTE: He genered Agent signature rectured when reinstating (36/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change DELETE 1.1 THUE TITLE E034 CAPUTO, ALBERT V 1.2 NAME NAME 2750 SW 26TH AVENUE, UNIT D 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 14 CITY - ST ZIP CITY-S1-ZIP Addition Change DELETE 2 1 TITLE TITLE 2.2 NAME PERETS, JOSEPH NAME 3132 S.W 2.3 STHEET ADDRESS % 201 S. BISCAYNE BLVD., SUITE 900 STREET ADDRESS 33145 2 4 CITY -ST-ZIP MIAMI FL 33131 CITY-ST-ZIP Change Addition **₩** DELETE 3.1 THLE TITLE 3.2 NAME PERETS, MARC NAME 2750 SW 26TH AVENUE, UNIT D 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY - ST - ZIP MIAM! FL CITY - ST-ZIP Change Addition DELETE 41 TILLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY - ST - ZIP CITY-ST-ZIP 50000190589**&**® 📙 DELETE 5.1 THUE TUTEF -07/26/96--01075--025 5.2 NAME NAME \*\*\*225.00 5.3 STREET ADDRESS STREET ADDRESS 5.4 CIEY - \$1 - 7IP CITY - ST - ZIP DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADORESS STREET ADDRESS 6.4 C:T r - 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). Florid 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 regal effect as if made under oath, that I are an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if charged, or on an adjustment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO