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

DOCUMENT # P94000021663 (7)

1. Corporation Name
JUDY ADAMS, INC.

Principal Place of Business
2500 PRESIDENTIAL WAY
#205
W PALM BEACH FL 33401

Mailing Address
2500 PRESIDENTIAL WAY
#205
W PALM BEACH FL 33401

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/21/1994
3a. Date of Last Report:

2. Principal Place of Business
21 2500 PRESIDENTIAL WAY
22 Suite, Apt. #, etc.: #205
23 City & State: WEST PALM BEACH
24 33401 25 Country: U.S.A.

2a. Mailing Address
26 2500 PRESIDENTIAL WAY
27 Suite, Apt. #, etc.: #205
28 City & State: WEST PALM BEACH
29 Zip: 33401 30 Country: U.S.A.

4. FEI Number: 65 048 7234 — 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

ADAMS, JUDY
2500 PRESIDENTIAL WAY
#205
W PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. [illegible fine print regarding registered agent statement under Florida Statutes]

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	CHIEF EXECUTIVE OFFICER
NAME	JUDY ADAMS
STREET ADDRESS	2500 PRESIDENTIAL WAY #205
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

☐ Change ☐ Addition

100001498201
-05/24/95--01057--004
****213.75 ****213.75

14. [illegible fine print certification statement under Florida Statutes]

SIGNATURE: Judy Adams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 26, 1995 407 689 8790

0243370 CP

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CORPORATION ANNUAL REPORT 1995

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

DOCUMENT # P94000021927

1. Corporation Name

CYRUS CORP.

Principal Place of Business	Mailing Address
8600 S.W. 92 Street Suite 201 Miami, Florida 33156	6301 S.W. 112 Street Miami, Florida 33156

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 3/25/94
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address	4. FEI Number / Applied For / Not Applicable
21 8600 S.W. 92 St.	26 6301 S.W. 112 St.	65-0482080
Suite, Apt. #, etc.: 22 Suite 201	Suite, Apt. #, etc.: 27	5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
City & State: 23 Miami, Florida	City & State: 28 Miami, Florida	6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
Zip: 24 33156 / Country: 25 USA	Zip: 29 33156 / Country: 30 USA	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CORPORATION INFORMATION SERVICES, INC. 1201 Hays Street Tallahassee, Florida 32301	81 Name: NASSER EFTEKHARI 82 Street Address (P.O. Box Number is Not Acceptable): 6301 S.W. 112 Street 83 84 City: Miami, FL — 85 Zip Code: 33156

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: NASSER EFTEKHARI — 4/21/95
Signature, type or print name of registered agent and title if applicable — DATE (Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE / NAME / STREET ADDRESS / CITY ST ZIP: PTD Nasser Eftekhari 6301 S.W. 112 St. Miami, FL 33156	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP — ☐ Change ☐ Addition 800001501448 -05/30/95--01030-014 ****200.00 ****200.00
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP — ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP — ☐ Change ☐ Addition

REMITTED BY MAY 1

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 added, additionally, an address.

SIGNATURE: NASSER EFTEKHARI — 4/21/95 — (305) 273-5577
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number