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 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000027224 (2)

1. Corporation Name
P.M.B. OF CENTRAL FLORIDA, INC.

Principal Place of Business
5331 N.E. SILVER SPRINGS BLVD.
SILVER SPRINGS FL 34488

Mailing Address
5331 N.E. SILVER SPRINGS BLVD.
SILVER SPRINGS FL 34488

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/08/1994
3a. Date of Last Report:

4. FEI Number: 59 3239323 — 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

2. Principal Place of Business
21
22 Suite, Apt. #, etc.: 4040 W Silver Springs Blvd
23 City & State: Ocala FL
24 Zip: 34482
25 County: Marion

2a. Mailing Address
26
27 Suite, Apt. #, etc.: 4040 W. Silver Springs Blvd
28 City & State: Ocala FL
29 Zip: 34482
30 County: Marion

9. Name and Address of Current Registered Agent
MOWJI, BHOOPENDRA J
5331 NORTHEAST SILVER SPRINGS BLVD.
SILVER SPRINGS FL 34488

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable): 4040 W Silver Springs Blvd
83 Ocala FL 34482
84 City — 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] DATE: 4/25/95

12. OFFICERS AND DIRECTORS

Field	Entry
TITLE	President/Director
NAME	Bhoopendra Mowji
STREET ADDRESS	P.O. Box 277 - 5331 NE Silver Springs Blvd
CITY, ST, ZIP	Silver Springs FL 34488
TITLE	V. Pres
NAME	Pankaj Mowji
STREET ADDRESS	138 Windy Pointe
CITY, ST, ZIP	Orange, CA
TITLE	V Pres
NAME	Mukesh Mowji
STREET ADDRESS	6514 McAbee Rd
CITY, ST, ZIP	San Jose, CA
TITLE	Sec/T
NAME	Radha Mowji
STREET ADDRESS	P.O. Box 277 - 5331 NE Silver Springs Blvd
CITY, ST, ZIP	Silver Springs, FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

200001547652
-07/27/95--01056--009
****200.00 ****200.00

REMITTED BY MAY 1
5/1/95 MB

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 or is attached with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 (904) 629-5850
Date — Daytime Phone #

0354105 CP