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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000028993 (1) DOCUMENT #
1. Corporation Name

EXA SO	ou t h florida region, in	IC.			
Principal Plac	e of Business	Mailing Address			III BDIIB (1881 18118 HBIIB (8168 1111 HBBI
9200 S DADELAND BLVD		9200 S DADELAND B	BLVD		
SUITE 412		SUITE 412		DO NOT WRITE	EIN THIS SPACE
Miami FL 331	156	MIAMI FL 33156		3. Date Incorporated or Qualified	THE THIS STACE
				04/13/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0525671	Not Applicable
Suite, Apt.	#, e tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pa	aid the current year Intangible
24	25	29	30	Personal Property Tax due June	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	rrọw, Kenneth F		81 Name		
9200 S DADELAND BLVD			82 Street A	Address (P.O. Box Number is Not Acceptate	ole)
	SUITE 412			<u></u>	
MV	AMI FL 33156		63		
			84 City		FL 85 Zip Code
44 5		00	<u> </u>	the state of the s	
office or a agent. I a	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and accept the oblig	of Florida, Such change wations of, Section 607,0505	atules, the above-hamed t as authorized by the corp i, Florida Statules.	corporation submits this statement for the poration's board of directors. I hereby acceptances	pt the appointment as registered
SIGNATURE					DATE
12.	Signature, typod or printed name of registered age OFFICERS AN		(NOTE: Registered Agent signature r	required when reinstalling) ADDITIONS/CHANGES TO OFFIC	
TITLE	P	DELETE	1.1 TOLE	DIESTOR	Change Addition
NAME	CURRAN, JOHN C	-	1.2 NAME	PIECES P.	_ ` ,
STREET ADDRESS	ARABA A DADRI AND DILID OFF ARA		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	ST	DELETE	2.1 TITLE	DIRECTOR.	☐ Change 😿 Addition
NAME	PRISKLE, STANLEY		2.2 NAME		•
STREET ADDRESS	9200 SOUTH DADELAND BLVD SUITE 100		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-ST-ZIP		
TITLE		☐ DELET É	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		No ere	4.4 CITY-ST-ZIP		Chares I Addres-
TITLE		☐ DELETE	5.1 TITLE		Change Addition

this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information and an armonical report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an anceiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in attachment with an address. 14. I hereby certify that the information support indicated on this annual report or support of corporation officer or director of the corporation.

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Change

Addition

FILED

Mar 04 1998 8:00am

Secretary of State