FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P94000056987 DOCUMENT # P940000. 1. Corporation Name Rodgn Properties, Inc. Principal Place of Business Mailing Address 1028 N.E. 84 ST SAME 3 Date Incorporated or Qualified 3a. Date of Last Report 6-2-94 MIAMI, FL 33138 2. Principal Place of Business 2a. Mailing Address Appiled For 26 Not Applicable Suite Apt #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 This corporation has ∗ability for intangible tax under s= 199 032. Florida Statutes ☐ Yes ☐ No Zip Country Country 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ARIEL POPLACK, ESQ. Street Address (P.O. Box Number is Not Acceptable) 82 4700-B SHERIDAN ST 83 Nowwood, R 33021 84 Zip Code City 85 11. Wursuant 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 Signal de Specific profesticane of registroriagent and tills Lapphrable — If the H. Helphened Approximation on area when tensh degi-OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE Addition ___ Change president 1.2 NAME 102 P N.E. 14 ST. STREET ADDRESS 1.3 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33138 14 CITY-ST-ZIP Change Addition DELETE 2 1 TIBLE 2.2 NAME STREET ADDRESS 2 3 STREET ADORESS 2.4 CHTY ST ZIP DELETE Addit on Charice 3 1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY ST ZIP 3.4 City St. Zif DELETE Change T Add for 4 1 JITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST. 7IP 4.4 CIEV ST ZIP 100001915841arge Acdition -08/08/96--01014--016 DELETE 5 1 TITLE 5.2 NAME ***225.00 STREET ADDRESS 5.3 STREET ADDRESS City St 7iP 5.4 CITY - \$1 - ZP DELETE Change Addition 6 1 HitE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 6.4 CITY - 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)(E). Florido Statute's Uniformation indicated on this angular report of a implemental agent of the output of the exemption stated in Section 119 07(3)(E). Florido Statute's Uniformation indicated on this angular report of a implemental agent of the output of the exemption stated in Section 119 07(3)(E). 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 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, Flor days that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

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TITLE

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TITLE

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