FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

APPROVED
AND
FILED

MAY 10 AM 10: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000065949 (7)

RAM MAJOR ENTERPRISE, INC.

13655 NE 3RD CT #13
MIAMI FL 33161

13655 NE 3RD CT #13
MIAMI FL 33161

3. 09/08/1994

21 13655 N.E. 3rd Ct
22 # 10
23 Miami, FL
24 33161 25 U.S.A.

26 13655 NE. 3rd Ct
27 # 10
28 Miami, FL
29 33161 30 U.S.A.

4. 59-3273311

5. $8.75 Additional Fee Required

6. $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

ASRA, RAM
13655 NE 3RD CT #13
MIAMI FL 33161

10. Name and Address of New Registered Agent

81
82 Street Address
83
84 FL 85

11.

12.
D
ASRA, RAM
13655 NE 3RD CT #13
MIAMI FL 33161

13. ADDITIONS, CHANGES OR DELETIONS

14.

SIGNATURE: ~~RAM ASRA~~ RAM ASRA 5/3/95 (305) 893-6452

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR AGENT

0174441 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1995

APPROVED AND FILED

1995 MAY 15 PM 10:35

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P94000066140 (2)

1. CARIDA PROPERTIES, INC.

Principal Place of Business	Mailing Address
3670 MAGUIRE BLVD. SUITE 105 ORLANDO FL 32803	3670 MAGUIRE BLVD. SUITE 105 ORLANDO FL 32803

3. Date Incorporated or Qualified: 09/02/1994

4. FEI Number: 59-3269986

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. The corporation has liability for intangible tax under S. 199.192 Florida Statutes. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 817 Douglas Ave	26 PO Box 140411
22 #177	27
23 Altamonte Sprgs Fl	28 Orlando Fl
24 32714 · 25 Seminole	29 32814 · 30 Orange

9. Name and Address of Current Registered Agent

MADDEN, CHARLES M
3670 MAGUIRE BLVD.
SUITE 105
ORLANDO FL 32803

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. Pursuant to the provisions of sections 607.0502 or 617.0502, 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

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
D MADDEN, CHARLES M 3670 MAGUIRE BLVD., SUITE 105 ORLANDO FL 32803	☒ Change ☐ Addition — 817 Douglas Ave #177 Altamonte Springs Fl 32714
D ALLEN, DONALD R 3670 MAGUIRE BLVD., SUITE 105 ORLANDO FL 32803	☒ Change ☐ Addition — 817 Douglas Ave #177 Altamonte Springs Fl 32714
D NEILL, ED 3670 MAGUIRE BLVD., SUITE 105 ORLANDO FL 32803	☒ Change ☐ Addition — 817 Douglas Ave #177 Altamonte Springs Fl 32714
	☐ Change ☒ Addition — Director Cynthia L. Aston 817 Douglas Ave #177 Altamonte Springs Fl 32714
	☐ Change ☐ Addition
	☐ Change ☐ Addition

14. I 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 on an attachment with an address.

SIGNATURE: [signature] Donald Ray Allen Jr 5/15/95 407-897-1443

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0065263 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

25

TALLAHASSEE, FLORIDA

DOCUMENT # P94000066741 (7)

1. Corporation Name

J & M MICRO INC.

Principal Place of Business	Mailing Address
3590 13 AVE SW NAPLES FL 33964	3590 13 AVE SW NAPLES FL 33964

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/06/1994

3a. Date of Last Report: 9/14

4. FEI Number: 65-0536047 — 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 [X] No

2. Principal Place of Business (21–25) / 2a. Mailing Address (26–30): Street Address, City & State, Zip, Country

9. Name and Address of Current Registered Agent

WOLFE, LARRY
200-A JOHN KNOX ROAD
TALLAHASSEE FL 32303-6643

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. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits the 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

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	RUGANIS, MICHAEL J
STREET ADDRESS	3590 13 AVE SW
CITY-ST-ZIP	NAPLES FL 33964
TITLE	D
NAME	JANOYAN, JANO P
STREET ADDRESS	3590 13 AVE SW
CITY-ST-ZIP	NAPLES FL 33964

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 — [ ] Change [ ] Addition

14. I hereby certify that the information supplied with this filing... [illegible]

SIGNATURE: [signature] MICHAEL J. RUGANIS 5/8/95 813-455-9677

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0338628 CP

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

ANNUAL REPORT

1995

DOCUMENT # P94000068115 (2)

1. Entity Name

KERI HOMES, INC.

Principal Place of Business	Mailing Address
1474-A WEST 84TH STREET HIALEAH FL 33014	1474-A WEST 84TH STREET HIALEAH FL 33014

APPROVED

FILED

95 MAY -8 PM 12:25

TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/13/1994

3a. Date of Last Report:

4. FEI Number: 65-0570902

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

7. This corporation has activity for unclaimed property (see s. 717.101, Florida Statutes) X Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
OSMAN, L M 1474-A WEST 84TH STREET HIALEAH FL 33014	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.1005, 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. The address so changed, the registered agent so changed, or both, are 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

12. OFFICER AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICER AND DIRECTOR DATA	
Title	PD	Title	☐ Change ☐ Addition
Name	OSMAN, CRAIG A	Name	
Address	17035 NW 78TH COURT	Address	
City-St-Zip	HIALEAH FL 33015	City-St-Zip	
Title	VD	Title	☐ Change ☐ Addition
Name	OSMAN, TY H	Name	
Address	3926 SKYLINE DRIVE	Address	
City-St-Zip	NASHVILLE TN 37215	City-St-Zip	
Title	VD	Title	☐ Change ☐ Addition
Name	OSMAN, L M	Name	
Address	1474-A WEST 84TH STREET	Address	
City-St-Zip	HIALEAH FL 33014	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this report is true, complete and accurate, and that I am qualified to sign this report pursuant to Section 607.0502, Florida Statutes. I further certify that the corporation shall file with the annual report or supplemental annual report a duly executed certificate stating that it has complied with all of the requirements of Chapter 607, Florida Statutes, and that my name appears above, or on an attachment with an asterisk, as an officer or director of the corporation or the name of the person authorized to execute the report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an asterisk, as an officer or director of the corporation with an address.

SIGNATURE: [signature] Vice-Pres. 5-6-95 305-823-1401

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number

0004702 CP