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

FILED Feb 13 1998 8:00am ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P94000070479 (8) RICHARD I. GILBERT, P.A. Principal Place of Business Mailing Address 7025 BERACASA WAY 7025 BERACASA WAY SUITE 208 SUITE 208 DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33433 BOCA RATON FL 33433** 3. Date Incorporated or Qualified 09/15/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 21 65-0526237 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Ζφ Country Ζip 8. This corporation owes or has paid the current year Intangible 24 30 ☐ Yes Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GILBERT, RICHARD I 7025 BERACASA WAY Street Address (P.O. Box Number is Not Acceptable) **SUITE 208** 83 **BOCA RATON FL 33433** 84 City Zip Code 85 11. Pursuant to the provisions of Sec office or registered agent, or bolk agent. I am amiliar with, and acq Statutes, the above-named corporation submits this statement for the purpose of changing its registered was authorized by the corporation's board of directors. I hereby accept the appointment as registered of Florica Statutes. tions 607 0502 and 601 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 OFFICERS AND DIRECTORS 13. DELE TE PRESIDENT Change Addition 1.1 TITLE TITLE GILBERT, RICHARD I 1.2 NAME NAME 7025 BERACASA WAY SUITE 208 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33433** 1.4 CITY-ST-ZIP CITY - ST - ZIP DELFTE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3 1 1/JLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE 4 1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ___ Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE

6 2 NAME

6.3 STREET ADDRESS

RICHARD

64 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiper or trusted 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 attagriment with an address?

NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE