FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 AUG 23 AM 9:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #P94000071202

1. Corporation Name

WINK INVESTMENT, INC.

Principal Place of Business / Mailing Address

782 N. Lejune Road, #530
Miami, Florida 33126

3. Date Incorporated or Qualified: 09/28/94
3a. Date of Last Report: 9/15/95

2. Principal Place of Business (21) / 2a. Mailing Address (26)

4. FEI Number: 65-0686962 Applied For ☒ / Not Applicable ☐

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc (27)

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

City & State (23) / City & State (28)

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

Zip (24) / Country (25) / Zip (29) / Country (30)

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JUAQUIN N. FERNANDEZ
2601 South Bayshore Drive
Suite 1400
Miami, Florida 33133

10. Name and Address of New Registered Agent

81 Name: JULIO C. MARRERO, ESQUIRE
82 Street Address (P.O. Box Number is Not Acceptable): 2903 Salzedo Street
83
84 City: Miami — FL — 85 Zip Code: 33134

11. Pursuant to the provisions of Sections 607.0202 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 of Florida Statutes.

SIGNATURE: Julio C. Marrero (Registered Agent Signature required when changed) — DATE: 5/15/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director/President ☒ DELETE Juaquin N. Fernandez 12405 S.W. 56 Street Miami, Florida 33175	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	Director/President/S/T ☒ Change ☐ Addition Alejandro De Leon 782 N. Lejune Road, #530 Miami, Florida 33126
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☒ Addition 800001993898 -08/28/96--01058--009 ****225.00 ****225.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (12/95)

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)(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: _____ 5/15/96 305-443-2300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone Number

ALEJANDRO DE LEON, PRESIDENT