FILE NOW: FILING FEE AFTER MAY 1 IS \$550,00

FILED Jun 09 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # P94000078423(8) TEE OFF WITH STEVE, INC. Principal Place of Business Mailing Address 20140-1 NE 3rd Ct 20140-1 NE 3rd Ct Miami, FL 33179 Miami, FL 33179 Date Incorporated or Qualified 10/24/99 3a. Date of Last Report 1/31/96 Principal Place of Business 809 Briar Ridge Rd 2a. Mailing Address 4. FEL Number Applied For 65-0531901 809 Briar Ridge Rd Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, ctc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Weston, 33327 Added to Fees 23 28 Weston, Trust Fund Contribution 33327 Country Zip Country Zio 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent R1 Name (NOTE NEW Steven Baach Street Address (P.O. Box Number is Not Acceptable) 809 Briar Ridge Rd ADDRESS) 83 Weston, FL 33327 84 Zip Code 11. Pursuant 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 Signalure, typed or printed name of registered agent and title if applicable (NOT): Registered Agent signature required when reinstating: OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change X Addition TITLE 1.1 TITLE 1.2 NAME NAME Baach, Steven Baach, Steven STREET ADDRESS 809 Briar Ridge Rd 1.3 STREET ADDRESS 809 Briar Ridge Rd 1.4 CITY-ST-ZIP CITY-ST-ZIP Weston, FL 33327 Weston, FL 33327 DELETE 2 1 111LE Change Addition TITLE 22 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3 1 TITLE Change Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3 4. CITY - S1 - ZIP DELF1E Change 417016 Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change ☐ Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 600002210926 -06/13/97--01002--024 ___ Addition 61 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS ***165.00 64 CITY - ST - ZIP

14. I do 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 start 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 control of the c

STEVEN

appears in Block 12 or Block

SIGNATURI