SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

DIVISION OF CORPORATIONS

POCUMENT # P9500003068 (0)

FILED Sep 25 1997 8:00am Secretary of State

RADA HOLDING CORPORATION Principal Place of Business Mailing Address 7333 CORAL WAY, STE. C 7333 CORAL WAY, STE. C MIAMI FL 33155 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3s. Date of Last Report 01/10/1995 02/13/1996 4. FEI Number 65-064 2019 Applied For 2. Principal Place of Business 2a. Mailing Address APPLIED FOR 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Properly Tax due June 30. 24 25 29 30 ☐ Yes 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent RAYVIS, MYRON J 81 Name 7333 CORAL WAY, STE. C 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33155 83 84 City Zip Code and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of lorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered tipn, of, Section 607.0505, Florida Statutes. 11. Pursuant to the prov office or registered agent. I am familia ions of Sections 607. SIGNATURE (NOTE: Registered Agent signature required when reinstating) RS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (4) DELETE Addition TITLE 11 TITLE ☐ Change RAYVIS, MYRON J 1.2 NAME NAME 7333 CORAL WAY, STE. C STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33155** CITY - ST - ZIP 1.4 CITY - ST- ZIP Change DELETE Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DFLETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Addition Change 6.1 TITLE TITLE 6.2 NAME NAME STREET ADDRESS 6 3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-7IP

14. I do hereby certify that the information supplied with this filing docentry qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this angual report or supplemental appeal 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 regover of trustoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 11 if grianged, or on an argument with an address.