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

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT FILED Secretary of State DIVISION OF CORPORATIONS 1997 97 JUN 30 AM 9: 52 DOCUMENT # P95000018254 (9) SECRETARY OF STATE TALLAHASSEE, FLORIDA BOCO, INC. Mailing Address Principal Place of Business 7500 W. COMMERCIAL BLVD. 7500 W. COMMERCIAL BLVD. LAUDERHILL FL LAUDERHILL FL 33319-2132 3. Date Incorporated or Qualified 3a. Date of Last Report 03/06/1995 05/01/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0563241 26 21 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 Zip Country Zip Country 8. This corporation has liability for intengible tax under s. 199,032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SLATKIN, SHELDON K 9900 W. SAMPLE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 400 83 **CORAL SPRINGS FL 33065** 84 City 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 300002239 Grange DAddison -07/03/97 -01072 -002 TITLE 1.3 TITLE HIPSCHMAN, JEFFREY S NAME 1.2 NAME 7500 W. COMMERCIAL BLVD. STREET ADDRESS 1.3 STREET ADDRESS ****165.00 ****165.00 LAUDERHILL FL CITY-ST-ZIP 1.4 City-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE ☐ Addition TITLE Change 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-\$1-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY-ST-ZIP DELETE TITLE Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under or 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. oath; that

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SIGNATURE:

5/13/62

(aca) mir - 2625