FILE NOW: FILING FEE AFTER MAY 1 IS \$2\$5.00 **PROFIT** FLORIDA DEPARTMENT "STATE CORPORATION Sandra B. Martham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000020495 (4) **DOCUMENT #** Corporation Name MISHI, INC. Mairing Address Principal Place of Business P.O. BOX 403755 P.O. BOX 403755 MIAMI BEACH FL 33140 MIAMI BEACH FL 33140 3a. Date of Last Report 3. Date Incorporated 0 03/14/1995 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Certificate of Status Desired Suite, Apt. #, etc. Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Z_{10} Country Ζiρ Yes 🖟 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Isaac Berman
Street Address (P.O. Box Number is Not Acceptable) SCHWARTZ, GERALD K **B2** 1428 BRICKELL AVE 2165 SW 47th Street 83 SUITE 206 MIAMI FL 33131 85 Zip Code 33312 FL Lauderdale d corporation submits this statement for the purpose of changing its registered office on's board of directors. I hereby accept the appointment as registered agent. I am 1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the advorced agent, or both, in the State of Florida. Such change was authorized by the familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE arstabila" CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change Addition 1 1 TiTLE DELETE. TITLE SHIMSHONI, MIKE 1.2 NAME NAME P.O. BOX 403755 N/A 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33140 14 CITY - S1 - Z-P Addition CITY-ST-ZIP Change P/D DELETE. 2 1 TIFLE TITLE Ziger-Berman, Roni 2.2 NAME NAME PO Box 403755 2.3 STREET ADDRESS STREET ADDRESS Miami, Beach, FL 2.4 Ci*Y - \$1 - Zi^D CITY-ST-ZIP Change Addition DELETE 3 1 TITUE TITLE 3.2 NAME Berman, Isaac NAME 3.3 STREET ADDRESS PO Box 403755 N/A STREET ADDRESS 3 4 CITY - ST-ZIP Miami Beach, FL CITY - ST - ZIF Change Add-tion DELETE 4 1 THLE TITLE 4.3 STREET ADDRESS STREET ADDRESS 8000017797 4.4.C.1Y - S1 - 7IF CITY-ST-ZIP -04/**15**/96---0103Î [] DELETE 5 1 liftE TITLE ***200.00 NAME 5 3 STREET ADDRESS STREET ADDRESS 54 CITY - ST - ZIP Addition CITY - ST - ZIP Change DELETE 6 1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS bes not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes. I further true and accurate and that my signature shall have the same legal effect as if made under 1 to execute this report as required by Chapter 607, Florida Statutes; and that my name CITY - ST - ZIP ing is voluntarily furnished and or supplemental annual report the receiver or trusted empowe 14. I do hereby certify that the information suppli certify that the information indicated on this oath; that I am an officer or director of the appears in Block 12 or Block 13 if chapter ment with an address

BERMAN