FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 **DIVISION OF CORPORATIONS** P95000024957 (9) DOCUMENT # MICHAEL R. HOMERDING, INC. Principal Place of Business Mailing Address 3501 SW 40TH AVENUE 3501 SW 40TH AVENUE HOLLYWOOD FL 33023 HOLLYWOOD FL 33023 3. Date Incorporated or Qualified 3a. Date of Last Report 03/27/1995 Principal Place of Business 2a. Mailing Arldress Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite Apit. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zφ Country Country 8. This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 15.0574721 Name HOMERDING, MICHAEL R 82 Street Address (P.O. Box Number is Not Acceptable) 3501 SW 40TH AVENUE HOLLYWOOD FL 33023 83 City 85 Zip Code 11. Pursuant to the Sections 607,0502 and 607,1508, Florida Statutes, the above named corporation submits this statement for roug, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam. 605, Florida Soutes. 12. CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1 1 TITLE ☐ Change ☐ Addition NAME 1.2 NAME RDING STREET ADDRESS CITY - ST - ZIP 1.4 CHY+ST, ZIP TITLE DELETE 2 1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 City - St - ZiP TITLE DELETE 3 1 TITLE ... ___Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3 4 CITY - ST - 719 TITLE DELETE 4 'TITLE 600001914926°° -08/07/96--01020--022 Addition 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS ***25.00 CITY - ST - ZIP 4.4 CUY - ST - 21P DELETE TITLE 5 1 THILE NAME 5.2 NAME STREET ADDRESS **5.3 STHEET ADDRESS** CITY - ST - ZIP 54 CITY - ST ZIP TITLE DELETE 6 1 FILE -Addition 7000019149 NAME 6.2 NAME --08/07/96--01020--023 STREET ADDRESS 6.3 STREET ADDRESS ***200.00 CITY-ST-ZIP 6.4 CITY - ST- ZIP 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)(k), 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 cath, 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 Buck 13 if or 1994, or 1 an absolute him this thin as address.

SIGNATURE: X