SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000025517 (0)**

1. Corporation Name
UNITED SOUTHERN INVESTMENTS, INC.

Principal Place of Business	Mailing Address
2740 E. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33306	2740 E. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33306

3. Date Incorporated or Qualified: 03/30/1995
3a. Date of Last Report:

2. Principal Place of Business
21:
Suite, Apt. #, etc.
22:
City & State
23:
Zip / Country
24: 25:

2a. Mailing Address
26: 2213 E. Atlantic Blvd.
Suite, Apt. #, etc.
27:
City & State
28: Pompano Beach FL
Zip / Country
29: 33062 30: Brwd.

4. FEI Number: 65-0570772 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

JOHNSON, ERIC
2740 E. OAKLAND PARK BLVD.
SUITE 300
FORT LAUDERDALE FL 33306

10. Name and Address of New Registered Agent

81 Name: Lennart Blomkvist
82 Street Address (P.O. Box Number is Not Acceptable): 2213 E. Atlantic Blvd.
83:
84 City: Pomp. Bch. FL 85 Zip Code: 33062

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] 8/8/96.
Signature of new registered agent and/or Applicant (NOTE: Registered Agent's signature required when changing) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	BLOMKVIST, LENNART C	
STREET ADDRESS	2740 E. OAKLAND PARK BLVD., SUITE 300	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	
TITLE	D	☒ DELETE
NAME	JOHNSON, ERIC R	
STREET ADDRESS	2740 E. OAKLAND PARK BLVD., SUITE 300	
CITY-ST-ZIP	FORT LAUDERDALE FL 33306	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P/S/T	☒ Change ☐ Addition
1.2 NAME	Blomkvist Lennart C.	
1.3 STREET ADDRESS	2601 NE 36 St.	
1.4 CITY-ST-ZIP	Lighthouse Pt, FL 33064	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	100001925691	☐ Change ☐ Addition
6.2 NAME	-08/19/96--01045--017	
6.3 STREET ADDRESS	***225.00	
6.4 CITY-ST-ZIP		

CR2E034 (3/96)

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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Pres. July 10 - 96 (954) 785-3885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Daytime Phone Number
Lennart Blomkvist