FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

TITLE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000034460 (2)

8500-8530 NW 40TH STREET, INC.

Principal Place of Business Mailing Address 8411 W. OAKLAND PARK BLVD., SUITE 202 8411 W. OAKLAND PARK BLVD., SUITE 202 SUNRISE FL 33351 SUNRISE FL 33351 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/03/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0579969 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Źφ Country 8. This corporation owes or has paid the current year Intangible Yes Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name CANARICK, BERNARD D 8411 W. OAKLAND PARK BLVD., SUITE 202 82 Street Address (P.O. Box Number is Not Acceptable) SUNRISE FL 33351 63 84 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 607.0506, Florida Statutes. SIGNATURE Signature, typed or printed name of impistered agent and title if applicable (NOT). Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE CANARICK, BERNARD D NAME 1.2 NAME 8411 W. OAKLAND PARK BLVD., SUITE 202 STREET ADDRESS 1.3 STREET ADDRESS SUNRISE FL 33351 City-St-7iP 1.4 CiTY - ST - 7IP DELETE Change ☐ Addition TITLE 2.1 THLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2 4 CiTY-SI-ZIP DELETE Addition TITLE 31 HILE NAME 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE

14. I hereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual expert as supplied entail annual report is true and appared and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of thy temporal for the true employed at execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plock 13 or Record or one by statement with an entire of the control of the contro

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY - ST - ZIP

SNATURE: 40 0000 (AND DECK PRES 123/98 (305)931-383

CR2E034 (10/97)

Change

Change

Addition

Addition

FILED

Jan 30 1998 8:00am

Secretary of State