FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State TIVISION OF CORPORATIONS P9500004577 **DOCUMENT #** B. P. PARTNERS, INC. Mailing Address Principal Place of Business 510 BUSINESS PARKWAY 510 BUSINESS PARKWAY SUITE A CUITE A -ROYAL PALM BEACH FL 33411 ROYAL PALM BEACH FL 33411 3a. Date of Last Report 3. Date incorporated or Qualified 06/13/1995 2a. Mailing Address 26 P.O. Box Applied For 4. FEI Number 2. Principal Place of Business - کی Not Applicable 21 \$8.75 Additional Suite, Apt. #, etc. 5. Cert-ficate of Status Desired Fee Required 27 \$5.00 May Be 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 Country Ζıρ Yes No Florida Statutes D26 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Pianko WELCH, EDWARD D 82 685 ROYAL PALM BEACHY BOULEVARD SUITE 105 83 84 Offy Palm Bouch FL 85 Zip Code 33411

30 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam of, Section 607.0505, Florida Statutes. ROYAL PALM BEACH FL 33411 ovisions of Section 11. Pursuant to th or registered 4/17/94 accept the obligation familiar with Harvey rianko SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. Change DELETE 1 YTULE TITLE PIANKO, HARVEY 1.2 NAME 186 Par Drive Royal Palm Beach NAME 510 BUSINESS PARKWAY, SUITE A 1.3 STREET ADDRESS STREET ADDRESS ROYAL PALM BEACH FL 33411 14 CHY ST-ZIP CITY-ST-ZIP Addition DELETE 2.1 Till: F TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 24 CHTY-ST ZIP CITY - ST - ZIP Change Addition DELETE 3 1 THILE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4 CITY - ST - ZiP CITY - ST-ZIP Change ☐ Addition DELETE 4.1 DILE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - Z.P CITY-ST-ZIP Change Addition DELETE 5 1 TITLE TITLE 5.2 NAME NAME 5.3 STHEET ADDRESS STREET ADDRESS 5.4 CiTY - ST - ZiP CHTY - ST - ZIP ☐ Change Addit on DELETE 6 1 TITLE TITLE NAME 63 STREET ADDRESS STREET ADDRESS 14. I do hereby certify that the information supplied with this fring/is defuntarily 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 of 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 foreign 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 inchanged, or on an attach pent with an address. 6.4 CiTY - 5! - 7:P

SIGNATURE:

OF SIGNING OFFICER OF DIRECTOR

Harvey Pianko 4/17/96

CR2E034 (12/95)