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PROFIT CORPORATION ANNUAL REPORT

1997



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FLORIDA DEPARTMENT OF STATE

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May 09 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000053946 (6)

SITUS INVESTMENTS, INC.

Principal Place of Business

6661 TAFT ST HOLLYWOOD FL 33024-5601 HOLLYWOOD FL 33024 3. Date Incorporated or Qualified 3a. Date of Last Report 07/13/1995 06/25/1996 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0598861 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional Spite Apt. # etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 28 Trust Fund Contribution 23 Country Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No Florida Statutes 25 29 30 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name ORTEGA, JOHN R 6861 TAFT ST Street Address (P.O. Box Number is Not Acceptable) 82 HOLLYWOOD FL 33024 83 Zip Code 84 City 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 Fiorida. 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: type of or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12 OFFICERS AND DIRECTORS 13. Change Addition PTD DELETE THILE 1.1 TITLE ORTEGA, JOHN R 1.2 NAME NAME **6861 TAFT ST** 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL CHY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition VSD 2.1 TITLE TITLE SHIN, STEVEN J 2.2 NAME NAME 6861 TAFT ST 2.3 STREET ADDRESS STREET ADORESS HOLLYWOOD FL CHY- \$1-20 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CI1Y - \$1 - 2/P DELETE ☐ Change Addition 4.1 TITLE THIE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ACORESS 4.4 CITY - ST - ZIP C01Y - \$1 - 7/2 DELETE Change Addition 51 TITLE HILE 196 52 NAME NAME 5.3 STREET ADDRESS -STREET ACORESS 5.4 CITY-ST-ZIP CITY - \$1 - ZIP Addition DELETE 6.1 TITLE Change THE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 607, Florida Statutes; and that my name