FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # **P95000055009 (1)**

1. Corporation Name
CERTIFIED ENTERPRISE GROUP, INC.

Principal Place of Business
12533 NORTHWEST 10 PLACE
SUNRISE FL 33323

Mailing Address
12533 NORTHWEST 10 PLACE
SUNRISE FL 33323

3. Date Incorporated or Qualified: **07/17/1995**
3a. Date of Last Report: NEW FILING

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29
Country — 25 / 30

4. FEI Number: 65-0609080 — 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**
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. **Name and Address of New Registered Agent**
81 Name: JEREMY DYSCH
82 Street Address (P.O. Box Number is Not Acceptable): 12533 NW 10 PLACE
83
84 City: SUNRISE FL 85 Zip Code: 33323

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: J. DYSCH - PRESIDENT — 4/20/96
Signature, typed or printed name of registered agent and the date signature. (For 84: Registered Agent's signature required when relocating) — Date

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	DYSCH, JEREMY H	
STREET ADDRESS	12533 NORTHWEST 10 PLACE	
CITY-ST-ZIP	SUNRISE FL 33323	
TITLE	V	☐ DELETE
NAME	SEROTA, BOBBY	
STREET ADDRESS	12533 NORTHWEST 10 PLACE	
CITY-ST-ZIP	SUNRISE FL 33323	
TITLE	S	☐ DELETE
NAME	SEROTA, SANDY	
STREET ADDRESS	12533 NORTHWEST 10 PLACE	
CITY-ST-ZIP	SUNRISE FL 33323	
TITLE	TD	☐ DELETE
NAME	DYSCH, MICHELLE	
STREET ADDRESS	12533 NORTHWEST 10 PLACE	
CITY-ST-ZIP	SUNRISE FL 33323	
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
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		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. DYSCH — 4/22/96 — (954) 749 7288
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)