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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #

Principal Place of Business

Corporation Name

P95000059111 (1)

Mailing Address

SYMETREE, INC.

2100 S. MIAMI RD. 2100 S. MIAMI RD. FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316 3. Date incorporated or Qualified 3a. Date of Last Report 07/28/1995 Applied For 4. FET Number 2a. Mailing Address 2. Principal Place of Business 65-0601608 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite. Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 This corporation has liability for intangible tax under s 199.032, Florida Statutes
Yes □ No
Name and Address of New Registered Agent Country Zip Zip 30 25 29 24 g. Name and Address of Current Registered Agent 81 Name FALCK, KENNETH C Street Address (P.O. Box Number is Not Acceptable) 82 2100 S. MIAMI RD. R3 FT. LAUDERDALE FL 33316 Zip Code City 85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DATE the TE. Registered Aport agreeting registed when remotating Signature, typical or printed name of registerior agent and the idial profets ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE 1 1 THLE TITLE FALCK, KENNETH C NAME 2100 S. MIAMI RD. 1.3 STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33316 14 CITY - ST - ZIP CITY-ST-ZIP Change Add tion DELETE 2 1 TITLE TITLE 2.2 NAMÉ NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY - ST - ZIP CITY-ST-ZIP Addition Change DELFIE 3 1 F-TLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - ST - ZIP CHY-ST-ZIP ☐ Addition □ Change DELETE 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

64 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 cath, that I am an officer by directors of the corporates or this receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 3 if changed, or or an algorithm with an address.

4.4.C:[1.SF-Z:P

5.3 STREET ADDRESS

6.3 STHEFT ADDRESS

5 4 CITY - \$1 - 20F

5 1 TITLE

5.2 NAME

6.13003

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-2IP

TITLE

NAME

TITLE

NAME

SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

Change

☐ Change

☐ Addition

Addition

(12/95)CR2E034