| AA FL 3004 DAMA FL 3004 DO NOT WRITE IN THIS SPACE 3. Data is coporated or granulated OCMARKS Principia Place of Business 2a, Mailing Address 2a, Mailing Address 2a, Mailing Address 2a, Mailing Address 4. FEI Nontee COV & Status Desired COV & Status CO | PR<br>CORPC<br>ANNUAL  | ROFIT<br>ORATION<br>L REPORT   | FEE AITER   | FLORIDA DEPA<br>Kather<br>Secreta  | RTMENT OF STATE<br>ine Harris<br>iny of State<br>CORPORATIONS   | FIL<br>Apr 27, 19<br>Secretary<br>04-27-1999 9011  | 99 8:00<br>7 of Sta   | <b>D am</b><br>1 <b>te</b>   |
|--|--|--|---|--|---|--|---|--|
| hoped Pixes of Business SW 4TH ST. SW 4TH ST. DUMAR E 3004  Principal Pixes of Business SW 4TH ST. DUMAR E 3004  Principal Pixes of Business A fee C T T T A fee Requires T T T T A fee Requires T T T T T T T T T T T T T T T T T T T   | Corporation Na   | ame  | 50000601  | 150  |   |  |   |  |
| Instrument     Mailing Address       VA HIS I.     72,55 WHIS I.       DANA FL 3304     DO NOT WRITE IN THIS SPACE       3. Date in corporated of Qualified     06(05/1995)       A FL 3304     A Flip Space       Brindpia Place of Business     2a, Melling Address       Bail     State, A. R. etc.       State, A. R. etc.     Subte, Apt. R. etc.       City A State     City A State       City A State     City A State       City A State     City A State       Bail     City A State       City A State     City A State       Bail     City A State       City A State     City A State       Bail     City A State       Bail     City A State       DANIA FL 33004     State City A State       Bail     City A State       DANIA FL 33004     State City A State       Bail     City A State       DANIA FL 33004     State City A State City A State Ci   | D & S CON  | NCRETE, INC.   |   |  |   |  |   |  |
| AA FL 3004 DMAA FL 3004 DMAA FL 3004 DMAA FL 3004 DO NOT WRITE IN TH-IS SPACE 3. Date in corporated or Qualified QR(X)(985 Minc, Act, #, etc. 20 Suite, Act, #, etc. 27 Suite, Act, #, etc. 27 Country 20 Country | ncipal Place of  | Business   | Mailin  | g Address  |   |  | I DØLLA DILLI DØLAT FIDER   |  |
| a Date is concreased or Control dig (1995)     Apr there For Object (1995)       Bute, Ait 4, etc.     21       Suite, Ait 4, etc.     22       Suite, Ait 4, etc.     21       City & State     22       City & State     23       Country     23       Zip     Country       Zip     23       Country     23       Country     23       Zip     23       Solute, Ait 4, etc.     23       Zip     Country       Zip     23       Country     23       Solute, Ait 4, etc.     24       Diale is contained distance       Solute, Ait 4, etc.     25       Country     28       Tail 5 and Contained distance       Solute, Appl. 4, etc.       Solute, Appl. 4, etc. <td< td=""><td>SW 4TH ST.<br/>NA FL 3004</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>  | SW 4TH ST.<br>NA FL 3004   |  |   |  |   |  |   |  |
| Principa Place of Business     2a.     Maintro Address     4     FEI Number     Aptilief For       Stafe, Axit, #, etc.     28     Solle, Apil, #, etc.     5.     Control on of Status Desired     Fee Rejurned       City & State     City & State     City & State     5.     Control on of Status Desired     Fee Rejurned       City & State     City & State     City & State     E.     Election Comparing Financing.     Added to Fees.       Zp     Country     20     Country     8.     True func Controlion     Added to Fees.       9.     Name and Address of Current Registered Agent     10.     Name and Address of New Registered Agent     10.       EtiSON, SYLVESTER     28     Street Ar dress (P.O. Box Number Is Not Acceptable)     20     20       725 SW 4TH 5T.     20     Coolen 09/1050.     State Ar dress (P.O. Box Number Is Not Acceptable)     20       9.     Control on one one one one one one one one one   |  |  |   |  |   | 3. Date Ir corporated or Qualifed  | THIS SPACE  |  |
| Suite, Ay, H, etc. 27 Suite, Ay, H, etc. 27 Suite, Ay, H, etc. 27 Cory & State 27 Cory & Zp Country 27  | Principa Place   | e of Business  | 2a. M   | ailing Address   |   | 4. FEI Number  | Ар  | rlied For  |
| 27     S. Certifiz et of Sinta Deared     Fee Required     Fee Required       City & Sinte     28     State     S. 5.00, 12a, 98       Zip     Country     Zip     Country     S. 5.00, 12a, 98       Zip     Country     Zip     Country     S. 5.00, 12a, 98       Jag     Jag     Jag     State Country     S. 5.00, 12a, 98       9, Name and Address of Current Registered Agent     10, Name and Address of New Registered Agent     Image: Signal Signa  | Suite Aut # e  |  |   | uite Apt # etc   |   |  |   |  |
| Zip     Country     Zip     Trust regree/Information     Added tr Fees       Zip     Zip     Country     R     This croppeding regree than public person at Property Tax.     Integree       9. Name and Address of Currant Registered Agent     81     Name and Address of New Registered Agent     Integree the current year integrities       9. Name and Address of Currant Registered Agent     81     Name     Integree the current Registered Agent       10. Name and Address of New Registered Agent     81     Name     Integree the current Registered Agent       11. Name     81     Name     Integree the current Registered Agent     Integree the current Registered Agent       12. DANIA FL 33004     81     Name     Integree the current Registered Agent     Integree the current Registered Agent       12. DANIA FL 33004     83     Integree the current Registered Agent on the current Regist  |  |  | 27  |  |   | •••••••  | Fee Re  | kjuired  |
| Image: State in the provisions of Sr chores of Current Registered Agent     Image: State in the provision of Sr chores of Current Registered Agent     Image: State in the provision of Sr chores of Corrent Registered Agent       Build Nume     Bill Name     Bill Name     Bill Name       ELISON, SYLVESTER<br>725 SW 4TH ST.<br>DANIA FL 33004     Bill Name     Bill Name       Bill Nume     Bill Name     Bill Name       Bill Nume     Bill Name <td>City &amp; State</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>   | City & State   |  |   |  |   |  |   |  |
| a) Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         EDISON, SYLVESTER<br>725 SW 4TH ST.<br>DANIA FL 33004       81       Name         B2       Street A clress (P.O. Box Number is Not Acceptable)       83         B4       City       FL       85       2/0 Cde         Pursuent to the provisions of Schom 607.0502 and 607.1508. Florids Statu les. The above-named or proration submits this statement for the puppose of changing its registered<br>agent. and finamis with, and a compt the chalgaband soft. Schom 607.0505. Philds Statutes.       81       About the approximation is not accept the chalgaband soft.         SNATUFE       Bigmann, types of private the chalgaband soft.       10. Time       Extent comparison of Clicens Schom 607.0505. Philds Statutes.         SNATUFE       D       OFFICERS ANI DIRECTORS       13. ADDITY INSICHANGES TO OFFICERS. IND DIRECTOFS IN 12         SNATUFE       D       D       Delease       10. Time         E       D       DELETE       11. Time       Change       Addition         City of private and prive and prive and prive and prive and private and private and priv   | Zip  | ,  |   | p  | ·   | , ,  |   | 1  |
| EUSON, SYLVESTER<br>725 SW 4TH ST.<br>DANIA FL 33004   | 9  |  |   | ed Agent   |   | 10. Name and Address of New Regist   | ered Agent  |  |
| DANIA FL 33004       83         B4       City       FL       85       Zip C Xie         Danuart to the provisions of Science 607.0502, and 607.1508, Florida Statutes, the above named or poration submits this statement for the purpose of changing its registered agent. I and main its with, and all cept the obligations of Q. Sector 607.0505, Florida Statutes.       Item constant of the purpose of changing its registered agent. I and main and all cept the obligations of Q. Sector 607.0505, Florida Statutes.         SMATUFE       Biguitarit, typical of purpose of the obligations of Q. Sector 607.0505, Florida Statutes.       Item constants       Item co   |  |  |   |  |   | dress (P.O. Box Number is Not Acceptable)  |   |  |
| B4         City         FL         85         Zip Cxde           Pursuent to the provisions of Science 607.0502 and 607.1508, Florida Statutes, the above named or poration submits this statement for the purpose of changing its registered agent. <i>J</i> in Ambinizer dty, and al cept the obligations of Section 607.0505, Florida Statutes.         Source of the obligation of the approximation submits this statement for the purpose of changing its registered agent. <i>J</i> in Ambinizer dty, and al cept the obligations of Section 607.0505, Florida Statutes.           SNATUFE  |  |  |   |  |   |  | ·····   |  |
| Plausent to the groutedons of 5 critions 607.0502 and 607.1508. Florida Statutes, the above named or provation submits this statement for the purpose of changing its registered agent. I am familier with, and at cept the obligations of, Section 607.0505. Florida Statutes.  SNATUFE  Signature, bried or protect mark of registered agent, and their registered to y the corporation's board of cirectors. I hereby accept the approximate agent are of registered agent. I am familier with, and at cept the obligations of, Section 607.0505. Florida Statutes.  SNATUFE  Signature, bried or protect mark of registered agent, and their registered to y the corporation's board of cirectors. I hereby accept the approximate agent are of registered agent, and their registered agent. I am familier with, and at cept the obligations of, Section 607.0505. Florida Statutes.  SNATUFE  Signature, bried or protect mark of registered agent, and their registered agent,      |  |  |   |  | 05  |  |   | 1  |
| office cr registered agent, or boh, in the State of Fiorida. Such change was authorized by the corporation s board of directors. Interesting within and publicate of the obligations of, Section 607.0505, Fiorida Statutes.   |  |  |   |  | 84 City   |  | 85 Zin (  | Code   |
| E D DELETE 1.1 TITLE Change Addition<br>PE EDISON, SYLVESTER<br>12 NAME<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY-S1-2P<br>VP<br>E EDISON, DIANA<br>EET ADDRESS<br>2725 SW 4TH STREET<br>DANIA FL 33004<br>21 Addition<br>22 NAME<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>Addition<br>22 NAME<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>Addition<br>22 NAME<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>24 CITY-S1-2P<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>22 NAME<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>24 CITY-S1-2P<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>E<br>10 DELETE<br>21 Change Addition<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>23 STREET ADDRESS<br>24 CITY-S1-2P<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | Pursuant to th   | he provisions of Secti   | ons 607.0502 and 607.   | 1508, Florida Statu  | tes the above-named or r  | rporation submis this statement for the purpo  | FL  | registered   |
| ee       EDISON, SYLVESTER       12 NAME         cett ADDRESS       725 SW 4TH ST.       13 STREET ADDRESS         r/str.2p       DANIA FL 33004       14 CITY-ST-2P         e       EDISON, DIANA       22 NAME         e       DANIA FL 33004       2 4 CITY-ST-2P         DANIA FL 33004       2 4 CITY-ST-2P         e       DANIA FL 33004       2 4 CITY-ST-2P         e       23 STREET ADDRESS         r/str.2p       DANIA FL 33004       2 4 CITY-ST-2P         e       2 DELETE       31 TITLE         e       2 CITA-ST-2P       Change       Addition         e       2 STREET ADDRESS       3 STREET ADDRESS       4 CITA-ST-2P         e       2 DELETE       4 STREET ADDRESS       4 CITA-ST-2P       4 Addition         e       EETADDRESS       4 STREET ADDRESS       4 CITA-ST-2P       4 Addition         e       EETADRESS       5 STREET ADDRESS       5 STREET ADDRESS       4 CITA-ST-2P       4 Addition         e       EETADRESS  | office cr regist<br>agent. I am fa<br>GNATUFE  | stered agent, or both,<br>amiliar with, and acce   | in the State of Florida.<br>pt the obligations of, Se   | Such change was a<br>action 607.0505, Flo  | tes, the above-named ccr<br>authorized by the corporat<br>rrida Statutes.   | tion s board of directors. Thereby accept the  | FL  <br>ise of changing its<br>appointment as re-   | registered   |
| Average       14 CITY-ST-2/P         E       VP       DELETE       2.1 TITLE       Change       Addition         eE       EDISON, DIANA       22 NAME  | office cr regist<br>agent. I am fa<br>GNATUF E<br>Signi  | stered agent, or both,<br>amiliar with, and auce<br>nature, typed or printed na ne   | in the State cf Florida.<br>pt the obligations of, Se<br>of registered agent and title if api                             | Such change was action 607.0505, Flipplicable. (NOT ORS  | tes, the above-named ccr<br>authorized by the corporat<br>orida Statutes.<br>Registered Agent signature require<br>13.  | red when reinstating)  | Image: second constraints   | registered<br>g.stered   |
| E       VP       DELETE       21 TTLE       Change       Addition         #E       EDISON, DIANA       22 NAME       23 STREET ADDRESS       24 CTTV-ST-ZIP         /:ST-ZP       DANIA FL 33004       2 CTTV-ST-ZIP       Change       Addition         #E       DELETE       31 TTTLE       Change       Addition         #E       DELETE       31 STREET ADDRESS       Change       Addition         #E       DELETE       31 STREET ADDRESS       Addition       Addition         #E       DELETE       41 TTTLE       Change       Addition         #E       DELETE       51 TTTLE       Change       Addition         #E       DELETE       51 STTLE       Change       Addition  | office crregist<br>agent. I am fa<br>SNATUFE<br>Sign<br>E<br>E<br>D<br>Ke<br>E   | nature, typed or printed ne ne<br>Of<br>DISON, SYLVESTE  | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS ANI ) DIRECT       | Such change was action 607.0505, Flipplicable. (NOT ORS  | tes, the above-named cc r<br>authorized by the corporat<br>prida Statutes.<br>E Registered Agent signature require<br>13.<br>1.1 TITLE  | red when reinstating)  | Image: second constraints   | registered<br>g.stered   |
| EEET ADDRESS       725 SW 4TH STREET<br>DANIA FL 33004       2.3 STREET ADDRESS         E  | office c r regist<br>agent. I am fa<br>SNATUF E<br>E D<br>RE EL<br>EET ADDRESS 72  | nature, typed or printed ne ne<br>Of<br>DISON, SYLVESTE<br>25 SW 4TH ST.   | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS ANI ) DIRECT       | Such change was action 607.0505, Flipplicable. (NOT ORS  | tes, the above-named cc r<br>authorized by the corporat<br>brida Statutes.<br>Registered Agent signeture requir<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS   | red when reinstating)  | Image: second constraints   | registered<br>g.stered   |
| Addition         2 4 CTTY-ST-ZIP           E              □ DELETE             3.1 TITLE             □ Change             □ Addition            KE              3.2 NAME            EET ADDRESS              3.3 STREET ADDRESS            /-ST-ZIP              3.4 CTTY-ST-ZIP            E              □ DELETE            KE              3.4 CTTY-ST-ZIP            E              □ DELETE            KE              □ DELETE            KE              □ DELETE            KE              4.2 NAME            KE              4.3 STREET ADDRESS            /-ST-ZIP               4.4 CTY-ST-ZIP            E              □ DELETE            KE              4.3 STREET ADDRESS            /-ST-ZIP               4.4 CTY-ST-ZIP            E              □ DELETE            S STREET ADDRESS  | office crregist<br>agent. I am fa<br>GNATUF E<br>Signa<br>EE D<br>AE EL<br>EET ADDRESS 72<br>(- ST-ZIP DA<br>E VF  | nature, typed or printed na ne<br>Of<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>DANIA FL 33004<br>P  | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS ANI ) DIRECT       | Such change was a section 607.0505, File (NOT ORS DELETE   | tes, the above-named cc r<br>authorized by the corporat<br>brida Statutes.<br>Registered Agent signeture requir<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP  | red when reinstating)  | TE<br>RS AND DIRECTO<br>Change  | registered<br>g.stered   |
| E       32 NAME         S2 NAME       33 STREET ADDRESS         /_ST-ZIP       34 CITY-ST-ZIP         E       1 TITLE         KE       43 STREET ADDRESS         /-ST-ZIP       44 CITY-ST-ZIP         E       1 DELETE         KE       51 TITLE         Addition       64 CITY-ST-ZIP         E       1 DELETE         STREET ADDRESS       43 STREET ADDRESS         /-ST-ZIP       44 CITY-ST-ZIP         E       1 DELETE         S1 TITLE       1 Change         Addition       42 NAME         EET ADDRESS       53 STREET ADDRESS         /-ST-ZIP       54 CITY-ST-ZIP         E       1 DELETE       61 TITLE         GE       1 DELETE       61 TITLE         E       1 DELETE       61 TITLE         E       1 DELETE       61 TITLE         KE       63 STREET ADDRESS       44 CITY-ST-ZIP         KET ADDRESS       63 STREET ADDRESS       44 CITY-ST-ZIP         KET ADDRESS       63 STREET ADDRESS       44 CITY-ST-ZIP   | office cr regist<br>agent. I am fa<br>SNATUF E<br>E D<br>RE EL<br>EET ADDRESS 72<br>C-ST-ZIP DA<br>E VF<br>RE EL   | nature, typed or printed na ne<br>Of<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>DANIA FL 33004<br>P<br>DISON, DIANA  | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS AN() DIRECT<br>R   | Such change was a section 607.0505, File (NOT ORS DELETE   | Ets, the above-named cc r<br>authorized by the corporat<br>prida Statutes.<br>E: Registered Agent signature requir<br>13.<br>1.1 TITLE<br>1 2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP<br>2.1 TITLE<br>2.2 NAME  | red when reinstating)  | TE<br>RS AND DIRECTO<br>Change  | registered<br>g.stered   |
| ET ADDRESS       3.3 STREET ADDRESS         /_ST-ZIP       34 CTTY-ST-ZIP         E  | office c r regist<br>agent. I am fa<br>SNATUF E<br>E D<br>RE EL<br>EET ADDRESS 72<br>(-ST-ZIP DA<br>E VF<br>RE EL<br>EET ADDRESS 72<br>C   | stered agent, or both,<br>amiliar with, and acce<br>nature, typed or printed na ne<br>OF<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>JANIA FL 33004<br>P<br>DISON, DIANA<br>25 SW 4TH STREE                                     | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS AN() DIRECT<br>R   | Such change was .<br>action 607.0505, FII<br>plicable. (NOT<br>ORS<br>DELETE<br>DELETE                       |   | red when reinstating)  | L   | registered<br>g.stered   |
| E       IDELETE       4.1 TITLE       IChange       Addition         ME       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP         EET ADDRE SS       4.4 CITY-ST-ZIP       IChange       Addition         EET ADDRE SS       5.1 TITLE       IChange       Addition         ME       5.2 NAME       IChange       Addition         ME       5.2 NAME       IChange       Addition         ME       5.3 STREET ADDRESS       IChange       Addition         V-ST-ZIP       54 CITY-ST-ZIP       IChange       Addition         EE       IDELETE       6.1 TITLE       IChange       Addition         AE       IDELETE       6.1 TITLE       IChange       IChange       IChange         Addition       6.2 NAME       IITLE       IChange   | office c r regist<br>agent. I am fa<br>GNATUF E<br>I.E. D<br>I.E. D<br>I.E. EL<br>I.E. D<br>I.E. C.C.<br>I.E. D<br>I.E. D<br>I.E. C.C.<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C.<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C. C.C.<br>I.E. C.C. C.C. C.C. C.C. C.C. C.C. C.C.  | stered agent, or both,<br>amiliar with, and acce<br>nature, typed or printed na ne<br>OF<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>JANIA FL 33004<br>P<br>DISON, DIANA<br>25 SW 4TH STREE                                     | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS AN() DIRECT<br>R   | Such change was .<br>action 607.0505, FII<br>plicable. (NOT<br>ORS<br>DELETE<br>DELETE                       |   | red when reinstating)  | L   | registered<br>g.stered   |
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| 4.4 CITY-ST-ZIP         E         ME         S2 NAME         52 NAME         53 STREET ADDRESS         7-ST-ZIP         E         DELETE         54 CITY-ST-ZIP         54 CITY-ST-ZIP         E         0 DELETE         61 TITLE         Change         Addition         ARE         61 TITLE         Change         Change         Addition         AE         61 TITLE         Change         Addition         AE         62 NAME         63 STREET ADDRESS         64 CITY-ST-ZIP   | office c r regist<br>agent. I am fa<br>GNATUF E<br>I.E. D<br>I.E. D<br>I.E. EL<br>I.E. D<br>I.E. C.C.<br>I.E. D<br>I.E. D<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C.<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C.<br>I.E. C.C.<br>I.E. D<br>I.E. C.C.<br>I.E. C.C. C.C. I.E.  | stered agent, or both,<br>amiliar with, and acce<br>nature, typed or printed na ne<br>OF<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>JANIA FL 33004<br>P<br>DISON, DIANA<br>25 SW 4TH STREE                                     | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS AN() DIRECT<br>R   | Such change was .<br>action 607.0505, FII<br>plicable. (NOT<br>ORS<br>DELETE<br>DELETE<br>DELETE             | Etes, the above-named cc r<br>authorized by the corporat<br>prida Statutes.<br>E Registered Agent signeture required<br>13.<br>1.1 TITLE<br>12 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP<br>2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY-ST-ZIP<br>3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY-ST-ZIP  | red when reinstating)  | L   | registered<br>g.stered   |
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| I heret y 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 suppliemental 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   | office c r regist<br>agent. I am fa<br>GNATUF E<br>Signi<br>LE D<br>AE EL<br>VEET ADDRE SS 72<br>Y-ST-ZIP D<br>AE EL<br>REET ADDRE SS<br>Y-ST-ZIP D<br>AE<br>REET ADDRE SS<br>Y-ST-ZIP LE<br>AE<br>REET ADDRE SS<br>Y-ST-ZIP LE<br>AE<br>REET ADDRE SS<br>Y-ST-ZIP LE<br>AE<br>REET ADDRE SS<br>Y-ST-ZIP LE<br>AE  | stered agent, or both,<br>amiliar with, and acce<br>nature, typed or printed na ne<br>OF<br>DISON, SYLVESTE<br>25 SW 4TH ST.<br>JANIA FL 33004<br>P<br>DISON, DIANA<br>25 SW 4TH STREE                                     | in the State of Florida<br>pt the obligations of, Se<br>of registered agent and title if app<br>FICERS AN() DIRECT<br>R   | Such change was .<br>action 607.0505, FII<br>ORS<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE<br>DELETE | tes, the above-named ccr<br>authorized by the corporat<br>orida Statutes.  Registered Agent signeture req in<br>13. 1.1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6 2 NAME   | red when reinstating)  | Image: Picture interview         Image: Picture intervinterim         Image   | registered<br>g.stered<br><u>F S IN 12</u><br>Addition<br>Addition<br>Addition |
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