FILE NOW	: FILING FEE /	AFIER MA	Y 1 IS \$225.00	)				
CORPORATION FLORIDA DEPARTMENT					STATE			
ANNUA	AL REPORT		Jim Smith					
1	996		Secretary of St		2010			
1. Corporation N		COVID	DIVISION OF CORPO		<del></del>			
!					√T #	•		
ROGERS & HEARNS SERVICES, INC. P9500006357								
Mailing Address		Principi	al Place of Business					
2801 PONCE DE LEON BLVD. 2801 PONCE DE LEON A					BLVD.			
SUITE 1000 SUITE 1000								
CORAL GABLES, FL 33134 CORAL GABLES, FL				1	33134	DO NOT WRITE	IN THIS	SPACE
H phase addresses as the second secon						3. Date Incorporated or Qualified		ate of Last Report
If above addresses are incorrect in any way, line through incorrect information and enter correct.  2. Mailing Address  2. Principal Black of Publishers					below.	08/16/1995		
21						4. FEI Number		Applied For
Suite, Apt. #,	Suite, Apt. #, etc. Suite, Apt. #, etc.						Not Applicable  6. Election Campaign	
22	27					\$8.75 Additional Fee Required Financing Trust		
Crty & State			City & State			7. Nonprofit Exempt from \$138.75		
Zip	Country	28 Zip	70			Supplemental Fee		Added to Fees
24	25	29	30	untry		This corporation has liability for in Florida Statutes      T	ntangible N	tax under S. 199.032,
9. Name and Address of Current Registered Agent						10. Name and Address of New R	_	
PERLSTEIN, ARNOLD ESQ.					Name		vgistore.	o Agent
4801 S. UNIVERSITY DR., 2nd. FLOOR					Street Addr	ess (P.O. Box Number is Not Acceptab	la)	
FORT LAUDERDALE, FL 33328					· · · · · · · · · · · · · · · · · · ·	- Total Complete		
′					City			85 Zip Code
11. Pursuant to	the provisions of Sections 60	7.0502 and 607.150	8 or Sections 617.0502 a	nd 61	7.1508, Florid	da Statutes, the above-named corporati	F	
I her soy acci	ept the appointment as regis ept the appointment as regis	d office or registered . stered agent. I am far	agent, or both, in the State niliar with, and accept the	of Fl	orida. Such o	da Statutes, the above-named corporation thange was authorized by the corporation 607.0505 or 617.0503, Florida Stati	on suom on's boar	d of directors.
SIGNATURE							ines.	
12.	gistered Agent Accepting Appointment) OFFICE					DATE		
1.1 TITLE	PDS			13.	TITLE	CHANGES TO OFFICERS	AND DIR	ECTORS IN 12
1.2 NAME	RODRIGUEZ, JULIAN J.				NAME			
1.3 STREET ADDRESS	2801 PONCE DE LEON BLVD., SUITE 1000			1.3	STREET ADDRESS	<u>'</u>		
1.4 CITY-ST-ZIP	CORAL GABLES, FL 33134			1.4	CITY-ST-ZIP	j		
2.1 TITLE 2.2 NAME	AS			2.1	TITLE			
2.3 STREET ADORESS	PERLSTEIN, ARNOLD 4801 S. UNIVERISTY DR., 2nd. FLOOR			ŀ	NAME			
2.4 CITY-ST-2IP	FT. LAUDERDAL	KISTY DR., E. FL 3332	2nd. FLOOR		STREET ADDRESS			
3.1 TITLE	TTV IMIODANDAN	D, FD 3332			CITY-ST-ZIP TITLE			
3 2 NAME		•			NAME	İ		
3 3 STREET ADORESS					STREET ADDRESS			
3 4 CITY - ST - ZIP				3.4	CITY-ST-ZIP			
4.2 NAME				41	TITLE			
4.3 STREET ADDRESS				42	NAME	1		
4.4 City - 51 - 2/P					Street address			
5 1 TITLE				_	CITY - ST-ZIP TITLE			
5 2 NAME					NAME	800001840528 -05/28/9601028012		
5 3 STREET ADDRESS	TREET ADDRESS				STREET ADDRESS	***200.00	ეგე	112
54 CITY-ST-ZIP					CITY-ST-ZIP	**************************************		
61 TITLE			i	_	TITLE			
6 2 NAME 6 3 STREET ADDRESS				6.2	NAME			5-01-96
6 4 CITY-ST-ZIP					STREET ACCRESS			5-01-96 526 96 00
	ertify that the information su	pplied with this filing	is voluntarily furnished and	6.4	CITY-ST-ZIP	x the exemption stated in Section 119.0 Information supplied is deemed exempt	<u> </u>	76011
Division of Co	orporations from any liability	of non-compliance w	ith Section 119 07/3)(k) in	U085	HOT QUARTY TO	a use exemption stated in Section 119.0	)7(3)(k), F	lorida Statutes. I release the

that the information indicated on this annual report or supplied is deemed exempt from public access. I further certify that I have fulfilled all obligations concerning unclaimed integer is true and accurate and that my signature shall have the same legal effect as if made under oath; empowered to execute this report as required by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee with an address.

SIGNATURE:

July 1. Rodr, 913

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