

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

1. Corporation Name

ROGERS & HEARNS SERVICES, INC.

DOCUMENT #

P95000063578

Mailing Address

2801 PONCE DE LEON BLVD.
SUITE 1000
CORAL GABLES, FL 33134

Principal Place of Business

2801 PONCE DE LEON BLVD.
SUITE 1000
CORAL GABLES, FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
08/16/1995

3a. Date of Last Report

2. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Principal Place of Business

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number

65-0602580

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

7. Nonprofit Exempt from \$138.75
Supplemental Fee ☐

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

PERLSTEIN, ARNOLD ESQ.
4801 S. UNIVERSITY DR., 2nd. FLOOR
FORT LAUDERDALE, FL 33328

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 or 617.0503, Florida Statutes.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE PDS
1.2 NAME RODRIGUEZ, JULIAN J.
1.3 STREET ADDRESS 2801 PONCE DE LEON BLVD., SUITE 1000
1.4 CITY-ST-ZIP CORAL GABLES, FL 33134

2.1 TITLE AS
2.2 NAME PERLSTEIN, ARNOLD
2.3 STREET ADDRESS 4801 S. UNIVERSITY DR., 2nd. FLOOR
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33328

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 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
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

13. CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 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
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

800001840528
-05/28/96--01028--012
***200.00

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Julian J. Rodriguez

4/29/96

4450777

5-01-96
526 96 OK