FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED **PROFIT** FLORIDA DEPARTMINI OF SIATE CORPORATION Sandra B. Mortham 97 JUN 27 AM 5: 55 **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1997 SECRETARY OF STATE TALLAHASSIE, FLORIDA DOCUMENT # P95000076702 (6) OPTIMAL CONSULTANTS, INC. Principal Place of Business Mailing Address 6850 NW 20 AVE 8850 NW 20 AVE FT LAUDERDALE FL 33309-1513 FT LAUDERDALE FL 33309 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996 10/06/1995 2. Principal Place of Business 20. Mailing Address 4. FEL Number Applied For McNah Rd. W Macnah 2020 2020 W 65-0615942 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional M 5. Certificate of Status Desired 10B Suite Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Loyderdale Lauderdale 28 Trust Fund Contribution Added to Fees Country Country Zιο 8. This corporation has liability for intangible tax under s. 199,032, 333*0*9 USA 3.3.309 Yes 🔀 No Florida Statutes 29 10. Name and Address of New Registered Agent 9: Name and Address of Current Registered Agent Name 81 ary, marid Jose B. Dantas Jr. 6850 NW 20 AVE 82 Street Address (P.O. Box Number is Not Acceptable) FT L'AUDERDALE FL 33309 83 City FT. 84 85 Zip Code 333309 Layderdale 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. Jase B. Donatous Ur. SIGNATURE printed name of registered agent and title if applicable (NOTE: Registered Agent signature required whon reinstating) alure, type ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE resident Change Addition TITLE 1.1 TITLE Reginaldo teodoro ARY, MARK 1.2 NAME NAME 2020 W. Mcnah Road Suite 108 3946 JASMINE LANE STREET ADDRESS 13 STREET ADDRESS Ft. Londerdale **CORAL SPRINGS FL 33065** 1.4 CITY-ST-ZIP CITY-ST-ZIP Vice - President Change **Addition** DELETE 21 TOLE TITLE Luiz Amaral BONTEMPO, SERGIO 2.2 NAME NAME 2020 W. Mcnah Rd Suite 108 3385 PINEWALK DRIVE N STREET ADDRESS 2.3 STREET ADDRESS 33309 MARGATE FL 33063 Ft. Landerdale CITY-ST-ZIP 2 4 CHY- ST- ZIF DELETE Secretary Change 3.1 TITLE TITLE Jose Dan 3.2 NAME NAME Rd Suite 108 w. Monab 2020 STREET ADDRESS 3.3 STREET ADDRESS 33309 layder dale CITY-ST-ZIP 3 4. CITY-ST-ZIP 7000022239487 — 38 -07/02/97-01097--009 DELETE TITLE 4.1 HTLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS ****173.75 ****173.75 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Change TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.

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(954) -972 - 6544

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