2007 FOR PROFIT CORPORATION

ANNUAL REPORT (AR) FILED DOCUMENT # P95000077997 Jan 22, 2007 08:00 AM **Secretary of State** RIDGEWOOD PLAZA OF FORT LAUDERDALE, INC. Principal Place of Business Mailing Address 2737 E. OAKLAND PARK BLVD. 2737 E. OAKLAND PARK BLVD. FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 33306 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #. etc. Suite, Apt #, atc 1st MOORE CR2E034 (10/06) City & State City & State Applied For 4. FEI Number 65-0624221 Not Applicable Ζıp Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo DAVEY, GORDON R Street Address (P.O. Box Number is Not Acceptable) 2737 E. OAKLAND PARK BLVD. SUITE 202 FORT LAUDERDALE FL 33306 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if approache. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD ☐ Addilion mu ☐ Defete 1003 Change BLAND, ROBERT W . NAMI NAMI U00000596466 2737 E. OAKLAND PK BLVD. STREET LADDRESS STREET ADDRESS FORT LAUDERDALE FL 33306 01/23/07-80080-013 158.75 City-St-ZiP CHY-SI-ZIP HISE ☐ Change ■ Add/tion Delete 1911 BLAND, MARGARET NAMI. NAME 2737 E. OAKLAND PK BLVD. STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33306 CITY-ST-7IP CHY-SI-7P ■ Addition mir ☐ Delete ☐ Change BLAND, WILLIAM NAMI. NAME: 2737 E. OAKLAND PK BLVD. STREET ADDRESS STREET ADDRESS CITY+ST-7IP FORT LAUDERDALE FL 33306 CHY-ST-ZIP mili Delete THE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-SI-7IP CITY-ST-7IP ☐ Addition THUE Defete Change THILL NAM NAMI STREET ADDRESS STREET LADDRESS CITY-ST-7IP CHY-ST-ZIP ☐ Change ш Addition Delete Title NAMI

I hereby certify that the information supplied with this filing doos not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an available with an address, with all other like empowered

STREET ADDRESS CITY-S1-ZIP

SIGNATURE

STREET ADDRESS

CITY - ST - ZIP

Robert Co. Blyoch (2017 07 ESK-565-8050)
HEROR DIRECTOR