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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500090003

AMERICAN HARLEY, INC.

Principal Place of Business 1717 WEST, 24TH STREET

Mailing Address

FILED Jan 21, 1999 8:00am Secretary of State

01-21-1999 90063 031 ***150.00



1717 WEST, 24TH STREET MIAMI BCH. FL 33140 MIAMI BCH, FL 33140 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/27/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0641161 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes the current year Intangible 24 Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name Bahar, Larry J 82 Street Address (P.O. Box Number is Not Acceptable) 888 S.E. THIRD AVE. SUITE 400 83 FT. LAUDERDALE FL 33316-3331 City Zip Code

11. 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.

Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change LOUIS-DREYFUS, IRENE NAME 12 NAME 1717 WEST, 24TH STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI BCH. FL 33140 CITY-ST-ZIP 1.4 CITY-ST-ZiP DELETE Addition □ Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change TITLE 5.1 TITLE ☐ Addition 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6 1 TITLE Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

14. I 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 oath; 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, with all other like empowered.

CR2E034 (11/98