

FILED

May 20 1998 8:00am

Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name: <u>9960000000432</u> <u>The Timberlake Group Associates, Inc.</u>					
Principal Place of Business <u>5050 N.W. 74 Ave.</u> <u>Miami, FL 33166</u>		Mailing Address <u>5050 N.W. 74 Ave.</u> <u>Miami, FL 33166</u>			
DO NOT WRITE IN THIS SPACE					
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified <u>196</u> 4. FEI Number <u>05-0032367</u> 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent <u>Rachael Suarez</u> <u>1710 Bay Dr.</u> <u>Miami Beach, FL 33141</u>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <u>FL</u> 85 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 <u>Rachael Suarez</u> DATE <u>4/30/98</u>					
12. OFFICERS AND DIRECTORS					
TITLE <u>PSTD</u> ☐ DELETE NAME <u>Suarez, Rachael</u> STREET ADDRESS <u>1710 Bay Dr.</u> CITY-ST-ZIP <u>Miami Beach, FL 33141</u>					
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE ☐ Change ☐ Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE ☐ Change ☐ Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE ☐ Change ☐ Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					
8000002533489 ☐ Change ☐ Addition -05/22/98-01073-028 ***158.75 <u>4/30/98</u>					
14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information is true and correct.					