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

PROFIT CORPORATION ANNUAL REPORT

STREET ADDRESS

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9600001360 (2)

1. Corporation	NAME TO POOL	00001360 (2)					
Principal Plac	e of Business	Mailing Address				I FRANCOS IIIO SOLIS BLUK DONII DONII EDILI DONII ODNIZI NEGOS IKKO QIIII DONI 1001	
400 NORTH ASHLEY DRIVE SUITE 2700 TAMPA FL 33602		400 NORTH ASHLEY DRIVE SUITE 2700 TAMPA FL 33602				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/01/1996	
2, Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				59-3117606 Not Applicab	
Suite, Apt. #, etc. 2		Suile, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State	0	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip 29	Cour 30	itry		This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	
	9. Name and Address of Cu	urrent Registered Agent		B1	Name	10. Name and Address of New Registered Agent	
11. Pursuant office or ragent. La	MPA FL 33602 To the provisions of Sections 607 egistered agent, or both, in the section familiar with, and accept the content of the section familiar with, and accept the section familiar with a section familiar	.0502 and 607 1508, Florida Statu State of Florida Such change was abligations of, Section 607.0505, Fl		ove by	City -named c the corpo	FL 85 Zip Code corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of register	nd agent and the if applicable (NO	TE Registered	Ager	nt signature re	required when reinstating) DATE	
12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME	D Ross, Harold R	X DELETE	1.1 TITLE 1.2 NAM			Chairman/CEO ☐ Change ☑ Addilion Marc Fratello	
STREET ADDRESS	TANDA EL DOGGO					400 N. Ashley Drive, Ste 2700 Tämpa, FL 33602	
C+TY-ST-ZIP	10M174 FC 00002	DELETE	2.1 TITL		- 200	Change Addition	
NAME			2.2 NAM				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			2.4 CIT	Y - S	T-ZIP		
TITLE		☐ DELETE	31 TITL	E		Change Addition	
NAME			3 2 NAM	ME.			
STREET AUDRESS			3.3 STR	EET A	ADDRESS		
CITY - ST - ZIP		T Access	3.4. CIT		T-ZIP	Character Lauren	
TIFLE		☐ DELFTE	4.1 7111			☐ Change ☐ Additio	
NAME			4. 2 NA	ME	- 1	1	

14. Thereby cell withat 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 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 supplied the 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 property of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 callect 1911 changed, or one statement with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TIFLE 6.2 NAME

DELETE

DELETE

Signature: Stephen M. Wagman Secretary 4/9/98 813.226.2600, x1067

CR2E034 (10/97)

Change

Change

Addition

Addition

FILED

Apr 16 1998 8:00am

Secretary of State