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

Block 12 or Block 13 if change

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Jul 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** P96000001962 (5) GARNIK ENTERPRISES, INC. Principal Place of Business Mailing Address 7845 N.W. S7TH STREET. SUITE A MIAM! FO 33166 7845 N.W. SZZA STREET, SUITE A MIAMI FL 32766 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/08/1996 2a. Mailing Address 4. FEI Number Applied For 26 7340 S.W 65-0633950 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City/8 State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Ves.A D. 29 Personal Property Tax due June 30. Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GARCIA, RODOLFO L 7845 N.W. 57TH STREET, SUITE A 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** 83 64 City Zip Code 85 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change DELETE Addition TITLE 1.1 TITLE NICK, LEON NAME 1.2 NAME 7845 N.W. 57TH STREET, SUITE A STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33166 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE. Change Addition TITLE 2.1 TITLE GARCIA, RODOLFO L NAME 2.2 NAME 7845 N.W. 57TH STREET, SUITE A STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33166** CITY-S1-ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-S1-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - 2IP DELETE Addition Change TITLE 51 TITLE NAME 5.2 NAME STREET ADORESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE TIFLE Change Addition 6.1 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied indicated on this annual report or supplied oes not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information it is true and execute and that my signature shall have the same legal effect as if made under eath; that I am an exemption to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

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