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Secretary of State
05-13-1999 90046 005 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

549937 - 90046 - 5

DOCUMENT # P96000002826

1. Corporation Name
PFT PROPERTY MANAGEMENT, INC. ✓

Principal Place of Business / Mailing Address
23257 STATE ROAD 7
SUITE 209
BOCA RATON, FL 33428

3. Date Incorporated or Qualified: 11/5/96
3a. Date of Last Report: 4/25/98

2. Principal Place of Business
21: 23257 STATE ROAD 7
22: Suite, Apt. #, etc.: # 209
23: City & State: BOCA RATON, FL
24: Zip: 33428
25: Country: US

2a. Mailing Address
26: 23257 STATE ROAD 7
27: Suite, Apt. #, etc.: # 209
28: City & State: BOCA RATON, FL
29: Zip: 33428
30: Country: US

4. FEI Number: 65-0633672 ✓ ☐ Applied For ☐ Not Applicable

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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
ARTHUR FRANKE
6511 ARLINGTON LANE
PARKLAND, FL 33067

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, 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) (Date) (Registered Agent signature required for all filings) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (D, 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☑ Change ☐ Addition PRESIDENT PITISLD ARTHUR FRANKE 6511 ARLINGTON LANE PARKLAND, FLORIDA 33067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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.

SIGNATURE: Franke ARTHUR FRANKE 4/25/99 561-420-4528