APPROVED FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham 97 AUG 13 PH 12: 56 ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # P96 0000 43765 Associates Incorporated Mailing Address 20051 Same 3a. Date of Last Report ate incorporated or Qualified 2. Principal Place of Bysiness Is 2a. Mailing Address Applied For Drive 26 Not Applicable Sulte, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State 6. Election Campaign Financing Roston, Florida \$5.00 May Be \Box Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, ☐ Yes ☐ No Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Brown Street Address (P.O. Box Number is Not Acceptable) 83 Radon, Fl 84 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 SHARON BROWN Should Swall Swal BROWN OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1.1 TITLE hesider Brown NAME 1.2 NAME Palm Island Drive STREET ADDRESS 13 STREET ADDRESS Radon, F1 33498 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 2.1 TITLE ☐ Change ☐ Addition TITLE ectetary Treasurer Valli Brown 20051 Palm Island Drive Boca Raton F1 33498 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - S1 - ZIP Change DELETE 3 1 TITLE Addition TITLE 3 2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY ST-ZIP 3 4. City-St-ZIP DELETE ☐ Change ☐ Addition 4.1 THLE TITLE 200002268722--0 -08/15/97--01091--012 *****165.00 *****165.00 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP

6.4 CHY-ST-7/P CITY-ST-ZiP 14. I do hereby cartify 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 suppliemental 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.

5.1 THILE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

5 4 CITY-ST-ZIP

6.3 STREET ADDRESS

TITLE

NAME

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

DELETE

SharoN Brown 6-10-97 (561)451 3471

Change Addition

Addition

Change