FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 08 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P97000014449 (7) PADRE, INC. Principal Place of Business Mailing Address **9300 N.W. 36 STREET** 9300 N.W. 36 STREET MIAMI FL 33178 MIAMI FL 33178 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 02/11/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intengible Yes □ Ño 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name HERMAN, JEFFREY M HERMAN, ROOF, BORGOGNONI & MOORE Street Address (P.O. Box Number is Not Acceptable) 100 S.E. SECOND STREET #2600 83 **MIAMI FL 33131** 84 City 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 Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) **OFFICERS AND DIRECTORS** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 TITLE NAME OGILBY, JOHN J JR 1.2 NAME 9300 N.W. 36 STREET STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33178 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE PD NAME BLAKE, RICHARD F 22 NAME STREET ADDRESS 9300 N.W. 36 STREET 2.3 STREET ADDRESS CITY-ST-ZIP MIAMI FL 33178 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE COILE, ROBERT C NAME 3.2 NAME 9300 N.W. 36 STREET 3.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33178** CITY-ST-7IP 3.4. CITY - ST - ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE DAVO A. BANMiller ELIO, WILLIAM T NAME 4.2 NAME 9300 MW. BL ST **9300 NW 36 STREET** STREET ADDRESS 4.3 STREET ADDRESS MIAML PL. 33178 **MIAMI FL 33178** CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP DELETE Change Addition TITLE 61 TITLE

6.2 NAME

6.3 STREET ADDRESS

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appeared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

NAME

STREET ADDRESS

SIGNATURE:

14. I hereby certify that the information suprindicated on this annual report or supplied officer or director of the corporation of Block 12 or Block 13 if changed or or

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