FILE NOW: FILING FEE AFTER MAY 1ST IS \$5

PROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Mar 16 1998 8:00am

| ANNUAL REPORT | | | Secretary of State DIVISION OF CORPORATIONS | | | ONS | Secretary of State |
|----------------------------------|--|--|---|---|------------------|--------------------------------|---|
| DOCU 1. Corporation CIBION | ni i varie | 0004346 | 64 (1) | | •— | | |
| | | | | | | | |
| Principal Plac | co of Business | Mailing Ad | dress | | | | - (1881/1981 (18 1841) 1841) ERKIN BENIN BENIN BONN BANDO KNIN BARKO BIKAN BIRN ADDI |
| 4026 INVERRARY BLVD. | | 4026 INVERRARY BLVD. | | | | | |
| SUITE 1412 LAUDERHILL | हा १११औ० | Suite 1412 Lauderhill Fl 333\$9 | | | | DO NOT WRITE IN THIS SPACE | |
| O TO DO IN WELL | 16 00000 | | | | | | 3. Date Incorporated or Qualified |
| | | | | | | | 05/13/1997 |
| ——— · | Place of Business | 2a, Mailing | Address | | | | 4. FEI Number (5-08) 5 (24) Not Applied For Not Applied ble |
| Suite, Apl. | #, etc. | the second control of the second control of the second | 26 | | | | \$8.75 Additional |
| 22 | | 27 | - t · · · · · · · · · · · · · · · · · · | | | | 5. Certificate of Status Desired Fee Required |
| City & Stat | e | City & S | State | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees |
| Zip | Country | Zip | | Coun | try | | 8. This corporation owes or has paid the current year Intangible |
| 24 | 25 | 29 | | 30 | | | Personal Property Tax due June 30. Yes No |
| | g. Name and Address of Ci OOKS, ALEXANDER R | urrent Hegistered Ag | ent | | B1 | Name | 10. Name and Address of New Registered Agent |
| | 26 INVERRARY BLVD. | | | | | | |
| SUITE 1412 | | | | [* | 82 Street Add | | iress (P.O. Box Number is Not Acceptable) |
| LAUDERHILL FL 33349 | | | | 8 | 93 | | |
| | | | | 1 | B4 | City | FL 85 Zip Code |
| 11. Pursuant office or agent La | to the provisions of Sections 607 registered agent, or both, in the semillar with, and accept the c | 7.0502 and 607.1508, State of Florida Such obligations of, Section | Florida Statu change was i 607.0505, Fl | ites, the abo authorized lorida Statu | ove by les | e-named corpora the corpora | poration submits this statement for the purpose of changing its registered tion's board of directors. I hereby accept the appointment as registered |
| | Signature, type a or pointed name of respective | | (NO | | Ager | nt signature requi | ired when reinstating) DATE |
| 12. | OFFICERS | S AND DIRECTORS | DELETE | 13. 1.1 Tift | <u> </u> | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| NAME | BROOKS, ALEXANDER R | • | L_J DECTAL | 1.2 NAM | | 1 | Er change E hashen |
| STREET ADDRESS | 4026 INVERRARY BLVD., | | 1412 1.3 STREET ADD | | | ADDRESS | |
| CITY-ST-ZIP | LAUDERHILL FL 333#9 | | | 1.4 000 | (-S1 | T-ZIP | |
| TITLE | | • | DELETE | 2 1 THL | Ę | | ☐ Change ☐ Addition |
| NAME | | | | 2 2 NAW | | | |
| STREET ADDRESS | | | | | | ADDRESS | |
| CITY-ST-ZIP TIFLE | The same of the sa | · · · · · · · · · · · · · · · · · · · | DELETE | 2. 4 CIT | _ | 13-16 | ☐ Change ☐ Addition |
| NAME | | | | 3.2 NAV | | Ì | · |
| STREET ADDRESS | | | | 3.3 STR | EET / | ADDRESS | |
| CITY-ST-ZIP | | | Therese | 3.4 CIT | | T-ZIP | |
| TITLE | | | DELETE | 4.1 TITL | | l | ☐ Change ☐ Addition |
| NAME PERFECT ADDRESS | | | | 4 2 NAM | | ADDRESS | |
| STREET ADDRESS City-St-Zip | | | | 4.3 STAI 4.4 CITY | | | |
| TITLE | | | DELETE | 5.1 Tilt | _ | | Change Addition |
| NAME | | | | 5.2 NAM | 1E | | |
| STREET ADDRESS | | | | 5.3 STR | EET / | address | |
| CITY-ST-ZIP | | | | 5.4 City | | T-ZIP | · · · · · · · · · · · · · · · · · · · |
| TITLE | | J | DELETE | 6.1 1171 | | - | Change Addition |
| NAME PAREET ADDROVED | | | | 6.2 NAM | | ADDOCCC | . • |
| STREET ADDRESS | | | | 635IR | tti j | ADDRESS | |

14. Thereby certify that the information supplied with this filing does not qualify for the examption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of receiver of the corporation or the receiver or frustee employee that I am an officer or director of the corporation or the receiver or trustee employee the security has a security of the security that I am an officer or director of the corporation or the receiver or trustee employee the security has required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, or on an attachment with an address

SIGNATURE: Clea Brosse Agrander & Bo