| wie       SAUL, PERRY       12 NAME         Let ADDRESS       10240 SW 125 ST.       13 STREET ADDRESS         V-ST-ZIP       MIAMI FL 33176       14 CITY-ST-ZIP         Let       DELETE       21 TITLE         WE       22 NAME         Let ADDRESS       23 STREET ADDRESS         V-ST-ZIP       2 CITY-ST-ZIP         Let ADDRESS       2 A CITY-ST-ZIP         V-ST-ZIP       2 A CITY-ST-ZIP         Let ADDRESS       2 A CITY-ST-ZIP         V-ST-ZIP       2 A AME         WE       3 STREET ADDRESS         Y-ST-ZIP       2 A CITY-ST-ZIP         Let ADDRESS       3 STREET ADDRESS         Y-ST-ZIP       2 A CITY-ST-ZIP         Let ADDRESS       3 STREET ADDRESS         Y-ST-ZIP       3 STREET ADDRESS         Y-ST-ZIP       3 STREET ADDRESS         Y-ST-ZIP       34 CITY-ST-ZIP         Let ADDRESS       4 CITY-ST-ZIP         Let ADDRESS       4 CITY-ST-ZIP         Let ADDRESS       4 CITY-ST-ZIP         Let ADDRESS       4 CITY-ST-ZIP         WE       2 NAME         Let ADDRESS       5 STREET ADDRESS         Y-ST-ZIP       2 NAME         Let ADDRESS <td< th=""><th>ANNU</th><th>PROFIT<br/>PORATION<br/>AL REPORT</th><th>EE AFTER N</th><th>FLORIDA DEPA<br/>Sandra</th><th>RTMENT OF<br/>B, Mortha<br/>ary of State</th><th>F STATE<br/>M</th><th>Apr 17 19<br/>Secretar</th><th></th><th></th></td<>  | ANNU  | PROFIT<br>PORATION<br>AL REPORT  | EE AFTER N   | FLORIDA DEPA<br>Sandra  | RTMENT OF<br>B, Mortha<br>ary of State  | F STATE<br>M  | Apr 17 19<br>Secretar  |  |                             |
|---|---|--|--|---|---|---|--|--|-----------------------------|
| Principal Pauls of Business     Applied For     Suite Applied | TOWN (  | & COUNTRY NEUROL<br>of Business  | OGICAL CONS  | Address   | ·   |   |  |  |                             |
| Sulfe, Apt. #, etc.     20     Sulfe, Apt. #, etc.     21     Into Applicable       Sulfe, Apt. #, etc.     27     Sulfe, Apt. #, etc.     5     C. Contribute     Status     Status       City & State     City & State     5     Control (Status Desired)     Status Desired     Status   | AMI FL 3317   | 76   | MIAMI  | FL 33176  |   |   | 3. Date Incorporated or Qualified                                    | THIS SPACE                                     |                             |
| Suite, Apt #, etc       Suite, Apt #, etc       Suite, Apt #, etc       \$         \$             Suite, Apt #, etc       \$             Suite, A  | rincipal Pla  | ace of Business  | <u>}</u>   | ing Address   |   |   | 4. FEI Number  |  |                             |
| Image: State       Image: State       Image: State       Image: State       Image: State       Image: State       State <td< td=""><td>suite, Apt. #</td><td>l, etc.</td><td>Suite</td><td>e, Apt. #, etc.</td><td></td><td></td><td>5. Certificate of Status Desired</td><td>\$8.75</td><td>Additional</td></td<>  | suite, Apt. #   | l, etc.  | Suite  | e, Apt. #, etc.   |   |   | 5. Certificate of Status Desired                                     | \$8.75   | Additional                  |
| Intel Fund Contribution         Added to Free           Zip         Zip         Zip         Country         8. This corporation ones on the paid the currenty periturning public process of New Registered Agent           SAUL PERRY<br>10240 SW 125 ST.<br>MIAMI FL 33176         Image: Street Address of New Registered Agent         Image: Street Address of New Registered Agent           Functional to the provisions of S07 0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Statu of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Statu of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Statu of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Statu of Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the Statu of Terpland           MATURE         Event context in the provisions of context in the provisions of context in the purpose of changing its registered agent, or both, in the Statu of Terpland         Dettext in the purpose of changing its registered agent, or both, in the Statutes, the above named corporation submits the statement of the purpose of changing its registered agent, or both, in the Statu of therepurpose of cha  | Sity & State  |  |  | & State   |   |   |  |  |                             |
| 28         29         30         Pressmal Property Tax due June 30.         Vess In No           6. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           SAUL, PERRY<br>10240 SW 125 ST.<br>MIAMI FL 33176         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           Furtuent to the provision of Sections B07 0502 and 607 1508. Florida Statutes         5/// 100         10. Name and Address of New Registered Agent           SMUL PERRY<br>10240 SW 125 ST.<br>MIAMI FL 33176         10. Name and Address of New Registered Agent Address of New Registered Agent Address of New Registered Agent Status         10. Name and Address of New Registered Agent Status           SMUL PERRY<br>10240 SW 125 ST.<br>10. Section R07 0502 Florida Status         10. Name Address of New Registered Agent Status         10. Name Address of New Registered Agent Status           SMATURE<br>10. Status         0. OFFICERS AND DIFECTORS IN 12         10. Name Address of New Registered Agent Status         10. Name Address of New Registered Agent Status           SNATURE<br>10. Status         0. OFFICERS AND DIFECTORS IN 12         11. Nitt         12. Name Address of New Registered Agent Status           SNATURE<br>10. Status         0. OFFICERS AND DIFECTORS IN 12         13. Street Address 1. North Status         14. Name         12. Name Address 1. North Status           11. Street Address 1. North Status         0. DELETE <td< td=""><td>7in</td><td>Couptry</td><td></td><td></td><td></td><td>tru</td><td></td><td>Added</td><td>to Fees</td></td<>  | 7in   | Couptry  |  |   |   | tru   |  | Added  | to Fees                     |
| SAUL, PERRY<br>10240 SW 125 ST.<br>MIAMI FL 33176     e1     Name       Pursuant to the provisions of Sections 607 0502 and 607.1568. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the obligations of. Socion 607.0500. End 607.1568. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and accept the obligations of. Socion 607.0500. End 607.0500. E   | .up   | 25   | 29   |   |   | u y   | Personal Property Tax due June 30.                                   | Yes [  | <b>-</b> -                  |
| SHOL, FERMI IR240 (SW 125 ST. MIAMI FL 33176  |   |  | Current Registered   | Agent   |   | 1 Name  | 10. Name and Address of New Registe                                  | ered Agent                                     |                             |
| MIAMI FL 33176     83       Pursuant to the provisions of Sections 607 0502 and 607.1568. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent. I am familier with, and accept the subclement as the statement of the purpose of changing its registered agent. I am familier with, and accept the digitation agent and its light agent and its light agent agent agent. The family with and accept the support agent at the light agent ag  |   |  |  |   | 8   | 2 Street Add  | ress (P.O. Box Number is Not Acceptable)                             | - <u>.                                    </u> |                             |
| Pursuant to the provisions of Sactions 607 0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pursoes of changing its 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 and ending the registered agent and ending the registered agent of directors. I hereby accept the appointment as registered agent and ending the registered attain attained)  OFFICERS AND DIFECTORS  I 24 OWNE  SAUL, PERRY  I 24 OWNE  E ADDED IN DELETE I 11 THE I 24 OWNE I 23 SHEET ADDESS I 24 OFT-ST-2P  E I DELETE I DELET | MIA   | MI FL 33176  |  |   |   |   |  | <u></u>  |                             |
| Human to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agont, or both, in the State of Firvida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont, and accept the colligations of, Soction 607,0505, Florida Statutes  NATURE  Septement registered agont, or both, in the State of Firvida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont. I am familier with, and accept the colligations of, Soction 607,0505, Florida Statutes  NATURE  Septement registered agont, or both, in the State of Firvida.  NOTE Registered Agent digitative request when references)  OFFICERS AND Diffe CTORS  I and accept the colligations of, Soction 607,0505, Florida Statutes  NATURE  Septement registered agont, and take it applicate  OFFICERS AND Diffe CTORS III T  OFFICERS AND Diffe CTORS III T  E  OFFICERS AND Diffe CTORS III T  E  Soction 607,050  III T  OFFICERS AND Diffe CTORS III T  E  OFFICERS AND III T  E  OFFICERS AND IIII T  E  OFFICERS AND III T  E  OFFIC |   |  |  |   |   |   | <u></u>  | los Zin  | Code                        |
| office or registered agent, and accept the obligations of south of Directors. I hereby accept the appointment as registered agent, tam termilier with, and accept the obligations of south 607 0506, Forda Statutes         SINATURE  |   |  |  |   | G   |   |  | FL S   | COUR                        |
| BigMature, type or primod name of tragetocida gare and stall applicable.       (NOTE: Registred Agent Bynach, or Bayes, and Stall applicable.       DATE       DATE         I       OFFICERS AND DIFIECTORS       IDELETE       1.1 YTLE       ADDITIONS/CHANGES TO OFFICERS AND DIFIECTORS IN 12         IE       D       SAUL, PERRY       12 NAME       1.1 YTLE       Change       Additio         KE       SAUL, PERRY       12 NAME       1.3 StREET ADDRESS       Change       Additio         Y-ST-ZIP       IDELETE       1.1 YTLE       Intel Additio       Change       Additio         KE       IDELETE       2.1 YTLE       Intel Additio       Intel Additio       Intel Additio         KE       IDELETE       2.1 YTLE       Intel Additio       Intel Additio       Intel Additio         KE       IDELETE       2.1 YTLE       Intel Additio       Intel Additio       Intel Additio         KE       IDELETE       SITELE       2.1 YTLE       Intel Additio       Intel Additio         KE       IDELETE       SITELET       ADDELETE       SITELET       Intel Additio         VST-ZIP       IDELETE       SITELET       ADDELETE       Intel Additio         KE       IDELETE       SITELET ADDRESS       Intele       Intel Additio  | Pursuant to   |  |  | OO Flasida Ctat   |   | in nomed oor  | nation automits this statement for the purp                          | na of changing I                               | te registered               |
| with minimum sector     SAUL, PERRY     12 MANE       Idea Signed Address     12 MANE       Idea Signed Address     13 Signed Address       Y-ST-Zip     MIAMI FL 33176     14 CITY-ST-Zip       Idea Signed Address     12 MANE       Idea Signed Address     12 MANE       Idea Signed Address     14 CITY-ST-Zip       Idea Signed Address     23 Signed Address       Y-ST-Zip     24 CITY-ST-Zip       Idea Signed Address     23 Signed Address       Y-ST-Zip     24 CITY-ST-Zip       Idea Signed Address     23 Signed Address       Y-ST-Zip     24 CITY-ST-Zip       Idea Signed Address     23 Signed Address       Y-ST-Zip     34 CITY-ST-Zip       Idea Signed Address     33 Signed Address       Y-ST-Zip     34 CITY-ST-Zip       Idea Signed Address     34 CITY-ST-Zip       Idea Signed Address     34 CITY-ST-Zip       Idea Signed Address     35 Signed Address       Y-ST-Zip     34 CITY-ST-Zip       Idea Signed Address     35 Signed Address       Y-ST-Zip     34 CITY-ST-Zip       Idea Signed Address     35 Signed Address       Y-ST-Zip     35 Signed Address       Y-ST-Zip     34 CITY-ST-Zip       Idea Signed Address     35 Signed Address       Y-ST-Zip     35 Sign   | NATURE  | igistered agent, or both, in th<br>n familiar with, and accept th  | e State of Florida. Si<br>e obligations of, Sec                                    | uch change was<br>tion 607.0505, F  | authorized<br>Iorida Statu  | by the corpora<br>tes.  | tion's board of directors. I hereby accept the                       | e appointment as                               | ts registered<br>registered |
| LE       DELETE       21 TITLE       Change       Additio         HE       22 NAME       23 STREET ADDRESS       23 STREET ADDRESS         V-ST-ZIP       24 CITY-ST-ZIP       Change       Additio         HE       DELETE       31 TITLE       Change       Additio         WE       32 STREET ADDRESS       33 STREET ADDRESS       Additio         Y-ST-ZIP       34 CITY-ST-ZIP       Change       Additio         WE       33 STREET ADDRESS       33 STREET ADDRESS       Additio         Y-ST-ZIP       34. CITY-ST-ZIP       Change       Additio         LE       DELETE       41 TITLE       Change       Additio         HE       DELETE       41 TITLE       Change       Additio         V-ST-ZIP       34 CITY-ST-ZIP       Change       Additio         V-ST-ZIP       44 CITY-ST-ZIP       Change       Additio         HE       DELETE       51 TITLE       Change       Additio         WE       S3 STREET ADDRESS       S3 STREET ADDRESS       S3 STREET ADDRESS       S3 STREET ADDRESS         Y-ST-ZIP       S4 CITY-ST-ZIP       Change       Additio         WE       S3 STREET ADDRESS       S3 STREET ADDRESS       S4 CITY-ST-ZIP      <   | NATURE  | igistered agent, or both, in th<br>n familiar with, and accept th<br>Signature, typed or printed name of regis   | e State of Florida. Si<br>e obligations of, Sec<br>stored agent and title II appli | uch change was<br>tion 607.0505, F  | authorized<br>Iorida Statu  | by the corpora<br>tes.  | ition's board of directors. I hereby accept the red when reinsteing) | e appointment as                               | registered                  |
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| 6 3 STREET ADDRESS  | NATURE<br>E<br>E<br>ET ADDRESS<br>-ST-ZIP<br>E<br>E<br>ET ADDRESS<br>-ST-ZIP<br>E<br>E<br>E<br>ET ADDRESS<br>-ST-ZIP<br>E<br>E<br>E<br>E<br>ADDRESS<br>-ST-ZIP<br>E<br>E<br>E<br>E<br>ADDRESS<br>-ST-ZIP<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E | Iglatered agent, or both, in th<br>n familiar with, and accept th<br>Signature, typed or printed name of rogis<br>OFFICE<br>D<br>SAUL, PERRY<br>10240 SW 125 ST. | e State of Florida. Si<br>e obligations of, Sec<br>stored agent and title II appli | Uch change was<br>shon 607.0505, F<br>cable (NC<br>S<br>DELETE<br>DELETE<br>DELETE<br>DELETE                    | authorized<br>lorida Statu<br>TE: Registored /<br>13.<br>1.1 TITL<br>1.2 NAM<br>1.3 STR<br>1.4 CITY<br>2.1 TITL<br>2.2 NAM<br>2.3 STR<br>2.4 CIT<br>3.1 TITL<br>3.2 NAM<br>3.3 STR<br>3.4. CIT<br>4.1 TITL<br>4.2 NAM<br>4.3 STR<br>4.4 CITY<br>5.1 TITL<br>5.2 NAM                         | by the corpora           Agent signature requi           E           E           E           E           E           E           E           SET ADDRESS           -ST-ZIP           E           E           KE           SET ADDRESS           Y-ST-ZIP           E           KE           E           KE           E           KE           E           KE           E           ME           EET ADDRESS           Y-ST-ZIP           E           ME           EET ADDRESS           Y-ST-ZIP           E           ME           EET ADDRESS           Y-ST-ZIP           E           ME           E           ME           E           ME           E           ME           E           ME           E           ME           E           ME | ition's board of directors. I hereby accept the red when reinsteing) | e appointment as                               | RS IN 12                    |
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