FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Block 12 or Block 13 if changed, or on any

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 JAN 22 PM 12: 21: POCUMENT # P97000072970 (1) SECRETARY OF STATE SEPTEMBER PROJECT II CORP. Principal Place of Business Mailing Address 7695 S.W. 104TH STREET 7695 S.W. 104TH STREET SUITE 210 **SUITE 210** DO NOT WRITE IN THIS SPACE MIAMI FL 33156 MIAM! FL 33156 3. Date Incorporated or Qualified 08/22/1997 2. Principal Place of Business 2a. Mailing Address Numbe Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Čertificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. Yes Yes ΠNα 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name LITTMAN, ERIC P 7695 S.W. 104TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 210** 83 **MIAMI FL 33156** 84 City Zip Code 85 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. Lappocable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DPS DFLETE Change ___ Addition TITLE 1.111116 LITTMAN, ERIC P 200002408942-1.2 NAME NAME -01/22/98--01065--028 7695 S.W. 104TH STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33156** ***6150.00 ****150.00 CITY-ST-ZIP 1.4 CITY-S1 - ZIP DELETE Addition Change TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CHY-ST-7IP CITY-ST-ZIP DELFTE Change ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - \$1 - 7IP DELETE ☐ Change ■ Addition TITLE 4.1 TITLE NAME 4.2 NAME 4.3 STHEET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY - ST- ZIP DELETE Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS DITY-ST-ZIP 6.4 CITY - ST- ZIP 14. Thereby 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 corporation or the report or Pugger empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an directment with my name appears in the corporation of th

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