APPROVEU SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AND AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). FILED **PROFIT** FLORIDA DEPARTMENT OF STATE 98 DEC 17 PM 1:30 CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA US ON THE FINDINGS INC. DO NOT WRITE IN THIS SPACE Incorporated or Applied For Not Applicable Suite, Ant. #, etc. Suite. Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Ζip Country Country Personal Property Tax due June 30. 30 25 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 85 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 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (2/98)☐ Change ☐ Addition TITLE 1.1 TITLE 000002720800-1.2 NAME NAME -12/23/98--01049--009 STREET ADDRESS 13 STREET ADDRESS ****150.00 ****150.00 14 CITY-ST-ZIP CITY-ST-ZIF Change 2.1 TITLE Addition TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADOR CITY-ST-ZIF 2. 4 CITY-ST-ZIP 3.1 TITLE ☐ Change Addition TITLE NAME STREET ADOS 3 3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY-ST-ZIP 4.1 TITLE Change ☐ Addition TITLE 4 2 NAME STREET ADDRESS STREET ADOR 4.4 CITY-ST-ZIP CITY-ST Change Addition TITLE 51 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY - ST - ZIP ☐ DELETE Addition Change TITLE 61 TITLE 6 2 NAME NAME STREET ADDRESS 6 3 STREET ADDRESS 6 4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this filling 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 corpogration 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 chapter 60, or on a nattachmed—with an address. Block 12 or Block 13 if cha

SIGNATURE

November 23, 1998.

State of Florida Department of State, Division of Corporations PO Box 6327 Tallahassee, Fl 32314

We received from your department the Dissolution or Revocation of FOCUS ON THE FINDINGS INC

The letter was addressed to 9100 Coral Way, Suite 7, Miami Florida 33165-2067.

We know that each taxpayer should be in control on the due date, but we do not know if the renewal notice was mailed to the Resident Agent.

This incorporation was incorporated and from this day we do not have any business, but we would like that the corporation will be active.

Please we kindly request from your people to process the check in the amount of \$ 150, that cover the annual renewal fee.

Thanks for your cooperation and for the inconvenience,

Juan F. Blazquez

ACCOUNTANT