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PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham FILED ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 OCT 20 PM 3: 20 **DOCUMENT #** P97000107767 SECRETARY OF STATE TALLAHASSEE, FLORIDA Di Rocco, Dombrow \$ 3601 W. Commercial Blub. SUITE 22 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified FORT LAUDERDALE, FL. 33309 <u>2/24/9'</u> 4. FEI Number 2a. Mailing Address Applied For 3601 W. Commurcial Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be LAUDER DALE, FORT Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 25 /20 DIC 29 30 Personal Property Tax due June 30. . D. Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B AKERS 81 3601 w. Commercial BWD 82 Suite 5 83 FORT LAUDERDALE, FL. 33309 LAUDERDALE 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 an accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE red agent and title if applicable DATE ted name of regis (NOTE, Registered Agent signature required when reinstating) CR2E034 (10/97) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT/TREASURER/DIR. 1.1 TITLE PRESIDENT/DIRECTOR Change TITLE Raymond. M. DIROCCO 3601 W. COMMERCIAL BLUD NAME C.B. AKERS 1.2 NAME 3601 W. Commercial BLVD STREET ADDRESS 1 3 STREET ADDRESS FORT LAUDERDALE, FL. 33309 FORT LAUDERDAUE, FL. 33309 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE SECRETARY/TREASURER/DIR. ST Change ALLAN B. DOMBROW 2.1 TITLE TITLE NAME 2.2 NAME 3601 W. COMMERCIAL BLUD. 2.3 STREET ADDRESS STREET ADDRESS FORT LAUDER DALE, FL. 33309 CITIF-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE ☐ Change HAME 3,2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 4.1 TITLE ☐ Change TITLE 500<u>00267</u> 70415 NAME 4. 2 NAME -01087--009 STREET ADDRESS 4.3 STREET ADDRESS *****61.25 *****61.25 CITY - ST - ZIP 4.4 CITY - ST - ZIF DELETE Change Addition TITLE 5 1 TITLE NAME 5 2 NAME 53 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6 1 TITLE NAME 62NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY - ST- ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated be ection 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if ghanged, or per ap attachment with an address. SIGNATURE: