PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000093515

1. Corporation Name

FILED Mar 11, 1999 8:00 am **Secretary of State**

03-11-1999 90013 036 ***150.00

DUGENT CORPORATION Mailing Address Principal Place of Business 14411 COMMERCE WAY, S-420 14411 COMMERCE WAY, S-420 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/02/1998 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 65- 08 _Not Applicable. 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Zip 8. This corporation owes the current year Intangible □No 30 Personal Property Tax. 25 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WEIDENBAUM, WALTER Street Address (P.O. Box Number is Not Acceptable) 82 14411 COMMERCE WAY, S-420 MIAMI LAKES FL 33016 83 Zip Code 84 City 85 1. 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 if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Addition □ DELETE 1.1 TITLE ☐ Change TITLE WEIDENBAUM, WALTER NAME 1.2 NAME 14411 COMMERCE WAY, S-420 STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL 33016 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE TITLE 2.1 TITLE ALLEN, TRAVIS 2.2 NAME NAME 14411 COMMERCE WAY, S-420 STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP 2 4 CiTY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE ROTTENBERG, STEVE NAME 3.2 NAME 14411 COMMERCE WAY, S-420 STREET ADDRESS 3.3 STREET ADDRESS MIAMI LAKES FL 33016 3.4. CITY-ST-ZIP CITY-ST-ZIP ["] Change ☐ Addition ☐ OELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change ☐ Addition ☐ DELETE 5.1 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE 6.1 TITLE ☐ Change ☐ Addition 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIE

CITY-ST-ZIP filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 14. I hereby certify that the information supplied with of strue and a course and that my signature shall have the same legal effect as if made under fath; that I am an empowered the execute this report as required by Chapter 607. Floring Statutes; and that my name appears in indicated on this annual report officer or director of the compare Block 12 or Block 13 if other like empowered.

SIGNATURE:

CR2E034 (11/98