FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S20978** **(0)**

1. Corporation Name
CLINTON INTERNATIONAL GROUP, INC.

Principal Place of Business
2121 PONCE DE LEON BLVD
PENTHOUSE II
CORAL GABLES FL 33134
US

Mailing Address
2121 PONCE DE LEON BLVD
PENTHOUSE II
CORAL GABLES FL 33134
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/24/1990
3a. Date of Last Report: 04/29/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. # — 22 / 27
City & State — 23 / 28
24 / 25 / 29 / 30

4. FEI Number: 65-0248757 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. The corporation has elected to participate in the Florida Election Campaign Financing Trust Fund ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
BOGGIO, LLOYD
2121 PONCE DE LEON BLVD
PENTHOUSE II
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505, and 607.1008, 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. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
D	MARCUS, STEWART	2121 PONCE DE LEON BLVD-PHA	CORAL GABLES FL
D	BOGGIO, LLOYD	2121 PONCE DE LEON BLVD-PH2	CORAL GABLES FL

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 1.
☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report is accurately transcribed and does not exceed, nor qualify for the exemption stated in Section 119.07(3)(n), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and complete, and that my signature shall have the same legal effect as if made under oath. If I am an officer or director of the corporation or the owner of trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the annual report with an address.

SIGNATURE: Lloyd J. Boggio 4/20/95 (305)441-8188
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Telephone #

0137060 CP