SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

Sep 10 1997 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name (9) UFF... EXCHANGE & GIROS, INC. Principal Place of Business Mailing Address 9837-8W-40-8T 9997 9W 40 ST MIAMI FL 89105 MIAMI-FL-00165 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 04/04/1991 4. FEI Number 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 9360 FOUNT AINEBUCAN BUID 9360 Not Applicable FOUNTAINIBIETH BUD 26 65-0251628 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired APT AP+ 308 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be FZ Fr MI AU. MAM 1 Trust Fund Contribution \Box 23 28 Added to Fees 33172 Zip Country Country 8. This corporation owes or has paid the current year Intangible 33172 Personal Property Tax due June 30 **∑**Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ARIAS, ALBA MARINA -9887-SW-40TH ST. Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI-FL 93165 FOUNTAINEBLETAN 83 Zip Code 33/7 2 84 City MIAMI 11. Pursuant to the provisions of Socions 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 117001 ARIAS, ALBA MARINA NAME 1.2 NAME BUD FOUNTAINE BLEAU -9837 SW 40TH ST. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIF 1.4 CITY - ST- ZIP DELETE Срапое Acdition TITLE 211111 NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 31 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST- ZIP ☐ DELETE Change Addition TITLE 4.1 TH LE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP ■ DELETE 5.1 TITLE Change Addition TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY - ST - 7IP DELETE Change L Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. I do hereby 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 eath; 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 12 or Block 12 if changed, or on an attachment with an address.

JULIEVIE DE

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