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 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S65328 (4)

1. Corporation Name

NATIONAL OPINION RESEARCH ~~CENTER~~, INC.
SERVICES

Principal Place of Business	Mailing Address
760 NW 107TH AVE. MIAMI FL 33172	760 NW 107TH AVE. MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/05/1991
3a. Date of Last Report: 05/27/1994
4. FEI Number: 65-0272088 — 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. This corporation has liability for intangible tax under s. 199.062, Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business (21) — Suite, Apt. #, etc. (22) — City & State (23) — Zip (24) — Country (25)

2a. Mailing Address (26) — Suite, Apt. #, etc. (27) — City & State (28) — Zip (29) — Country (30)

9. Name and Address of Current Registered Agent

LIPSON, ERIC
760 NW 107TH AVE.
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name: DANIEL E. CLAPP
82 Street Address (P.O. Box Number is Not Acceptable): 760 NW 107 AVENUE
83 SUITE 106/115
84 City: MIAMI FL 85 Zip Code: 33172

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 [signature]

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	P	TITLE	S — ☒ Change ☐ Addition
NAME	LIPSON, ERIC	NAME	LIPSON, ERIC
STREET ADDRESS	9096 N.W. 53RD MANOR	STREET ADDRESS	9096 NW 53rd Manor
CITY-ST-ZIP	CORAL SPRINGS FL	CITY-ST-ZIP	Coral Springs, FL
TITLE	VP	TITLE	☐ Change ☐ Addition
NAME	TEBLUM, RONALD	NAME	
STREET ADDRESS	9073 NW 53RD ST	STREET ADDRESS	
CITY-ST-ZIP	CORAL SPGS FL	CITY-ST-ZIP	
TITLE	P	TITLE	☐ Change ☐ Addition
NAME	CLAPP, Daniel	NAME	
STREET ADDRESS	760 NW 107th AVE	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33172	CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(x), 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: (X) [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — (Y) 3/31/95 Date — (Z) 305 553-8585 Daytime Phone #

0107218 CP