FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1996 DIVISION OF CORPORATIONS **S72099 DOCUMENT #** E. F. INSPECTIONS, INC. Principal Place of Business Mailing Address EFTYNC 10230 NW 24 ST 9817 NW 9TH COURT SUMPISE EL 33322 PLANTATION FL 33324 3. Date Incorporated or Qualified 08/09/1991 2. Principal Place of Business 4. Fei Number 65-0272916 2a. Mailing Address EFI INC 650272916 14121 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 22/4/21 HARPENS TERRY Certificate of Status Desired  $\Box$ Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Vs No 25 BROWARD 29 BRUWAR 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FAINER, ERIC 1412| HARPEN FEMY ST. 1 DAVIE FL. 33325 82 Street Address (P.O. Box Number is Not Acceptable) **. 9817 NW 9 GOURT** PLANTATION FL 33321 83 84 City Zip Code 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Holinia (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS (12/95)13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1. 1 TITLE ERIC FAINE ☐ Change FAINER, ERIC NAME 1.2 NAME 14121 HARPERS FERNY 9817 NW 9 COURT CR2E034 STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL DAVIE, FL. 33325 CITY-S!-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2. 1 TITLE Change Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE □ DEFEL 3 1 TITLE Change ☐ Addition NAME 32 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE Change Addition 52 NAME STREEL ADDRESS 5.3 STREET ADDRESS CITY-S1-ZIP 5.4 DITY-ST-ZIP THE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 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)(k). 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. 6-1-25-96 954 2944803 SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR