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 DOCUMENT # S73383 (9) C.S. COMPANIES, INC. Principal Place of Business Mailing Address 13420 S W 128TH STREET 43420 S W 128TH STREET MIAMI-FL-23186 WAWI FL 00106 3. Date Incorporated or Qualified 3a. Date of Last Report 08/15/1991 05/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mainou Address Applied For NW S KINGE DR 7921 NWS RIVER DR 65-0280498 Not Applicable Suite, Apt. #, etc. 205 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199,032, 29 Florida Statutes Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name GARDNER, LEONARD L ESQ. 11852 SW 169th St. Street Address (P.O. Box Number is Not Acceptable) 13420 S W 128TH STREET **MIAM! FL-33106** 83 MIAMI FL 33177 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statistes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flori in. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Larn SIGNATURE JOSE on John d'Agred Signalitate le quinchaber le stating 12. OFFICERS AND DIRECTORS (12/95)13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELLIE 1.5 0000 Change Addition NAME SMITH, CHARLES 1.2 NAM: CR2E034 13420 S.W. 128TH ST 7921 NW S RIVE DR. STREET ADDRESS 1.3 STREET ADDRESS CITY - ST-ZIP 1.4 City - St - ZiF TITUE 2 1 TII, F Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 C-TY - \$1 - ZIP TITLE DELETE 3 1 100 6 Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY ST-ZIP 3.4 CHY ST-7-P THLE DELETE 4 1 11 LE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STHEET ADDRESS CITY ST-ZIP 4.4 CITY - \$1 - ZIP TITLE DELFTE 5 1 TILLE Change Add tion NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5 4 City - ST- ZIP TILLE DELETE 6 1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 64 CIY-ST ZiP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under appears in Block 12 or Block 13 if charged, or circlan attrachment with an address. SIGNATURE:

Daytin e Francia

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR