FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED May 18 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # S74803 (5)FATHER & SON, INC. OF SOUTH FLORIDA Principal Place of Business Mailing Address 3551 NORTH WEST 15TH STREET 3551 NORTH WEST 15TH STREET SUITE B SUITE B DO NOT WRITE IN THIS SPACE LAUDERHILL FL 33311 LAUDERHILL FL 33311 3. Date Incorporated or Qualified 08/20/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0282910 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 П 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PORCARO, JOHN 3551 NORTH WEST 15TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) SUITE B 83 LAUDERHILL FL 33311 City Zip Code 85 Fl 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, typed or printed name of registered agent and title if applicable (NOTE_Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1 1 TITLE Change SILVETTI, FILEMENA NAME 1.2 NAME 3551 NW 15 ST STREET ADDRESS 1.3 STREET ADDRESS LAUDERHILL FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITE F DELETE 21 TITLE Change 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 31TILE Change 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST-ZIP DELETE TITLE 4.1 THLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY - ST-ZIP DELETE Change TITLE 51 TITLE

64 CITY-ST-ZIP 14. I 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 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.

5.2 NAME

61 TITLE

6.2 NAME

5.3 STREET ADDRESS 54 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

☐ DELETE

Johnforcaro 4/30/48 (954)321-9800

Addition

Addition

Addition

Addition

Addition

Addition

☐ Change

Applied For

Not Applicable