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

**FILED PROFIT** FLORIDA DEPARTMENT OF STATE Jan 15 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (4)S95820 SOUTHEAST CREW LEASING, INC. Principal Place of Business Mailing Address 7295 NW 41 ST ST 7295 NW 41ST ST MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS SPACE 119 US 3. Date Incorporated or Qualified 11/21/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0315571 21 26 Not Applicable 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 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DILLMAN, HOWARD D. 2952 S. MIAMI AVE. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33129 83 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 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) DATE CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. TITLE DELETE Change Addition 1.1 TITLE KERIVAN, ROBERT NAME 1.2 NAME 7295 NW 41ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Addition Change TITLE 2.1 TITLE KERIVAN, ROBERT 2.2 NAME NAME 7295 NW 41ST ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY - ST- ZIP 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4. 2 NAME NAME STREET ADDRESS 4,3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

6.4 CITY-ST-ZIP

WITHIN' C. GOMEZ

16/98 (305)593-8847

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 by the result of the corporation or the receiver of the corporation or the receiver of the corporation of t

CITY-ST-ZIP

SIGNATURE: