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

FILED **PROFIT** FLORIDA DEPARTMENT OF STATE Mar 24 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **POCUMENT** # S99567 ARCADIAN GROUP, INC. Mailing Address Principal Place of Business 7296 SW 146 ST. CR. 7296 SW 146 ST. CR. MIAMI FL 33158 MIAM! FL 33158 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 12/11/1991 2a. Mailing Address Applied For 2. Principal Place of Business 65-0300297 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation owes or has paid the current/year Intangible Zip Country Zφ Yes □ No Personal Property Tax due June 30. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DUNN, WILLIAM C. 7296 SW 146 ST. CR. 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33158 83 City Zip Code 84 85 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. DATE (NOTE: Registered Agent signature required when reinstating) Signature, typod or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. OFFICERS AND DIRECTORS Change Addition DELETE 1.1 TITLE TITLE DUNN, KATHLEEN H. 1.2 NAME NAME 7296 SOUTHWEST 146 ST. CIRCLE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CHY-ST-ZIP CITY-ST-ZIP Change Addition DELETE DPT 21 TITLE TITLE DUNN, WILLIAM C. 2.2 NAME NAME 7296 SW 146 ST. CR. 23 STREET ADDRESS STREET ADDRESS MIAMI FL 2 4 CiTY+ST-ZIP CITY+ST-ZIP Change ☐ Addition DELETE 3.1 TITLE DUNN, PATRICK C. 3.2 NAME NAME 7296 SOUTHWEST 146 ST. CIRCLE 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 41 TITLE TITLE DUNN, H P 4.2 NAME NAME 7296 SW 146 ST CR. 4.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33158** 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition | DELETÉ 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZiP CITY-ST-ZIP Change ___ Addition DELETE TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIF 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

a address. PATRICIA DUNN