FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS (4)DOCUMENT # V12667 2001 PALM BEACH LAKES INC. Principal Place of Business Mailing Address 2001 PALM BEACH LAKES BLVD 2001 PALM BEACH LAKES BLVD SUITE 300 SUITE 300 WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409 3. Date Incorporated or Qualified 3a. Date of Last Report 02/04/1992 02/07/1995 2. Principal Place of Business 2a. Mailing Address 4. FEt Number Applied For 21 26 65-0316346 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country $Z_{\rm IDA}$ Country 8. This corporation has liability for intangible tax under s 199,032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HAAS, JOSEPH 82 Street Address (P.O. Box Number is Not Acceptable) 2001 PALM BEACH LAKES BLVD **SUITE 300** 83 WEST PALM BEACH FL 33409 City 85 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 accept the obligations of, Section 607.0505, Florida Statutes. Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating): OFFICERS AND DIRECTORS (12/95)12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 THILE DELETE 1 1 TITLE ☐ Change Addition HAAS, JOSEPH NAME 1.2 NAME CR2E034 2001 PLM BCH LKS BVD 300 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL CHTY-ST-ZIP 1.4 CITY - ST - ZIP TITLE ☐ DELETE 2.1 TITLE Change ☐ Addition HAAS, JOSEPH NAME 2.2 NAME 2001 PLM BCH LKS BVD 300 STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP THLE DELETE 3.1 TITLE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP THILE DELETE 4.1 TITLE Addition Change NAME 4.2 NAME 400001797274 -04/29/96--01015--033 STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP ***200.00 DILE DELETE. 5. 1 TITLE Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP TITLE 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 filling 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 amount 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 eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Flock 12 or Block 13 if changed, or the last true properties that an address.

SIGNING OFFICER OR DIRECTOR

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SIGNATURE: __

SIGNATURE AND TYPED