2006 FOR PROFIT CORPORATION

Jul 13, 2006 8:00 am Secretary of State ANNUAL REPORT 07-13-2006 90022 026 ***150.00 DOCUMENT #V15486 1. Entity Name COHEN, BERKE, BERNSTEIN, BRODIE & KONDELL, P.A. COUMNEID Principal Place of Business Mailing Address 10220 SW 142ND ST 10220 SW 142ND ST MIAMI, FL 33176 MIAMI, FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (11/05) 07052006 Chg-P City & State Applied For City & State 4. FEI Number 65-0336568 Not Applicable Žip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COHEN, JEFFREY M C/O CARLTON FIELDS Street Address (P.O. Box Number is Not Acceptable) 100 S E SECOND STREET MIAMI, FL 33131 City Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE 1S \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. TITLE ☐ Delete TITLE XX Change Addition BERNSTEIN, RICHARD N. NAME NAME 10220 SW 142nd Street STREET ADDRESS 10200 SW 142ND STREET STREET ADDRESS Miami, FL 33176 CITY-ST-ZIP MIAMI, FL 33176 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition IIILE NAME BRODIE, STEVEN J NAME STREET ADDRESS 10200 SW 142ND STREET STREET ADDRESS MIAMI, FL 33176 CITY - ST - ZIP CATY ST ZIP PD ☐ Change JULE ☐ Delete TITLE Addition COHEN, JEFFREY M NAME NAME STREET ADDRESS 3628 ST GAUDENS ROAD STREET ADDRESS MIAMI, FL 33133 CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE Change ☐ Addition BERKE, MICHAEL A NAME NAME STREET ADDRESS 13420 SW 98 CT STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33176 CITY-ST-ZIP Change Addition TIFLE ☐ Delete TITLE KONDELL, KAREN P NAME NAME STREET ADDRESS 2462 BAY ISLE CT STREET ADDRESS WESTON, FL 33327 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

SIGNATURE:

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

7/5/06

(305) 579-0640

□ Change

☐ Addition

Davime Phone #

FILED