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

FILED May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V31106 (0) POINT SEVEN, INC. Principal Place of Business Mailing Address **520 BRICKELL KEY DRIVE** 520 BRICKELL KEY DRIVE SUITE 305 SUITE 305 MIAMI FL 33131 DO NOT WRITE IN THIS SPACE MIAMI FL 33131 3. Date Incorporated or Qualified 04/24/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 65-0341043 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 28 Added to Fees Zip Žφ Country 8. This corporation owes or has paid the current year Intangible 24 29 30 Personal Property Tax due June 30. ☐ Yes g, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name FREEMAN, STEPHEN A 520 BRICKELL KEY DRIVE Street Address (P.O. Box Number is Not Acceptable) SUITE 305 83 **MIAMI FL 33131** 84 City 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 algorature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ☐ Change ☐ Addition DELETE 1.1 TITLE TITLE FREEMAN, STEPHEN A NAME 1.2 NAME 520 BRICKELLKEY DR. SUITE 0-305 STREET ADORESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE 21 TITLE ☐ Addition **BOTELHO, EDUARDO** 520 BRICKELL KEY DR #305 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3.1 TITLE Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition | TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

14. Thereby 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 13 if changed, or on an attachment with agreed ress. Starl A Fran

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP