FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V31785** **(1)**

1. Corporation Name

NEW FLORIDA INTERNATIONAL CORPORATION

Principal Place of Business
4775 COLLINS AVE
MIAMI BCH. FL 33140
US

Mailing Address
4775 COLLINS AVE.
MIAMI BCH. FL 33140
US

3. Date Incorporated or Qualified: 04/28/1992
3a. Date of Last Report: 03/17/1995

2. Principal Place of Business (21)
Suite, Apt. #, etc. (22)
City & State (23)
Zip (24) Country (25)

2a. Mailing Address (26)
Suite, Apt. #, etc. (27)
City & State (28)
Zip (29) Country (30)

4. FEI Number: 65-0329057 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CARVALHO, FELISBERTO J DE BULH
4775 COLLINS AVE.
MIAMI BCH. FL 33140

10. Name and Address of New Registered Agent

81 Name: STEPHEN A. FREEMAN
82 Street Address (P.O. Box Number is Not Acceptable): 520 BRICKELL KEY DRIVE
83 SUITE 0-305
84 City: MIAMI FL 85 Zip Code: 33131

11. Pursuant to the provisions of Sections 607.0507 and 607.1528, 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] DATE: 4/30/96

12. OFFICERS AND DIRECTORS

TITLE	S	☐ DELETE
NAME	FREEMAN, STEPHEN A	
STREET ADDRESS	520 BRICKELL KEY DRIVE SUITE 0-305	
CITY-ST-ZIP	MIAMI FL	
TITLE	P	☐ DELETE
NAME	ATHAYDE, MUCIO	
STREET ADDRESS	4775 COLLINS AVE.	
CITY-ST-ZIP	MIAMI BCH. FL	
TITLE	VP	☒ DELETE
NAME	CARVALHO, FELISBERTO J DE BULH	
STREET ADDRESS	4775 COLLINS AVE.	
CITY-ST-ZIP	MIAMI BCH. FL	
TITLE	VP	☒ DELETE
NAME	CARVALHO, FELISBERTO J	
STREET ADDRESS	4775 COLLINS AVE.	
CITY-ST-ZIP	MIAMI BCH. FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information contained in this filing 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 the 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 a 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, or added, or deleted by amendment, or is added.

SIGNATURE: MUCIO ATHAYDE PRESIDENT — 4/30/96 — (305)673-6644

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

CR2E034 (12/95)