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

STREET ADDRESS

CITY-ST-ZIP

**FILED PROFIT** May 04 1998 8:00am ELORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name V55454 (5)GARNAIRE, INC. Principal Place of Business Mailing Address 250 E ROYAL PALM RD 250 E ROYAL PALM RD APT 3B DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33432** BOCA RATON FL 33432 3. Date Incorporated or Qualified 08/05/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0352625 Not Applicable Suite, Apt. #. etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zio Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name MOORE, JAMES W. 801 BRICKELL AVENUE Street Address (P.O. Box Number is Not Acceptable)
700 NoRTHEAST 90# STREET 82 **SUITE 1401** 83 **MIAMI FL 33131** 84 MIAMI 11. Pursuant to the provisions of Soctions 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 signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE \_\_\_ Change Addition NAME **GARNER, JOHN MICHAEL** 1.2 NAME 250 E ROYAL PALM RD APT 3B STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE **GARNER, MARTHA JOYCE** NAME 2.2 NAME 250 E ROYAL PALM RD APT 3B STREET ADDRESS 23 STREET ADDRESS **BOCA RATON FL** 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 3.1 T(TLE Change Addition HIGGINS, JACKIE NAME 3.2 NAME 250 E ROYAL PALM RD APT 3B STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 41 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP City-St-ZiP DELETE ☐ Change \_\_\_ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME

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 Block 12 or Block 13 if changed, or on an attachment with an address. 1/14/98 (5/1)338-5610

6.3 STREET ADDRESS