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

FILED Mar 30 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # M61682 RICHARD DOUGLAS, INC. Principal Place of Business Mailing Address 17830 W. DIXIE HWY. 17830 W. DIXIE HWY. N. MIAMI BEACH FL 33160-4822 N. MIAMI BEACH FL 33160-4822 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1987 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 65-0018002 26 Not Applicable Suite Apt # etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 25 29 30 ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name BRAVERMAN, RICHARD J. 17830 W. DIXIE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) N. MIAMI BEACH FL 33179 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1 1 TITLE Change Addition BRAVERMAN, RICHARD NAME 1.2 NAME STREET ADDRESS 3225 NE 184TH ST., APT 10101 1.3 STREET ADDRESS **AVENTURA FL 33160** CITY - ST - ZIP CITY-ST-ZIP DELETE TITLE ITLE Change Addition NAME STREET ADDRESS TREET ADDRESS CITY-ST-ZIP OTY~\$T-ZIP DELETE TITLE TLE Change Addition MALIF AME STREET ADDRESS REET ADDRESS CITY - ST - ZIP CITY-ST-ZIP THLE DELETE TLE Change Addition AME STREET ADDRESS TREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DELETE TITE F TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5) CITY-ST-ZIP DELETE TITLE 61 TITLE Change Addition

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 of supplemental annual report is rule 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 receives of rustoes impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed; on on an attachment with an oddress. RUGUARD BRAVERMAN PAU / 3-24-8505 - 935-1788 SIGNATURE:

62 NAME

63 STREET ADDRESS 4 CITY-ST-ZIP

NAME

STREET ADDRESS