2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 8:00 am Secretary of State 01-18-2005 90065 015 ****61.25

Solid Address Solid Addres		MENT # N03000010 LA COVE AT WATERSTON			90003 013				
Sile, Apt. 4, etc. Sile,	80 S.W. 8TH ST., STE. 1870 -80		80 S.W. 8TH ST., STE. 18	80 S.W. 8TH ST., STE. 1870 -			5000308	6	
Suito, Apt. #, etc. Suito, Apt. #, etc. Suito, Apt. #, etc. Suito, Apt. #, etc. Suito, St. #, etc. Sui	2. Principal P	lace of Business		id at					
City A State	Suite, Apt.	#, etc.	Suite, Apt. #. etc.		01062005 Ch	ng-NP	CR2E037 (10/03)		
S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name Name Name Name Name Name Nam	City & State	е	City & State	A		8	<u> </u>	<u> </u>	
Name	Zip		33186	Country	5. Certificate of Sta	atus Desired			
BROS W. 8TH ST, STE. 1870 MIAMI, FL 33130 8. S.W. 8TH ST, STE. 1870 MIAMI, FL 33130 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 or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered office or registered agent or both, in the State of Florida. I am familiar with, and accept the obligations of Florida Department o		6. Name and Address of Current	Registered Agent		7. Name and Add	ress of New R	egistered Agent		
B. 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 Injury Signa	80 S.W. 81	TH ST., STE. 1870							
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, hybrid name of registered agent and itself applicable.	MIAMI, FL	33130		City			7:- 0-4		
SIGNATURE				City			FL Zip Coo	е	
10.	_	Signature, typed or printed name of registered agent	······································	•					
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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 eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, 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 like empowered.

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