: <b>200</b>	I UNIFURM BUS	ME33 NEPU	nı	lani	n,			
DOCUMENT # P92000014759  1. Entity Name						FILED SECRETARY OF STATE		
FLORIDA INVESTMENT GROUP, INC.						JIVISION OF CORPORATIONS		
Principal Place of Business Mailing Address						OIMAY-1 PM 3:06		
Süit	Coral Way e # 200 i, Fl 33145	Suite # 200						
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & Stat	· ·	City & State			4.	FEI Number 65-0404013	Applied For Not Applicable	
Zip	Country	Zip	Coun	try	5.		8.75 Additional	
	6. Name and Address of Current	Registered Agent			7.	Name and Address of New Registered Ag	jent	
FLORIDA ANNUAL REPORT SERVICES INC.								
2300	Coral Way, Suite i, Fl 33145			Street A	Street Address (P.O. Box Number is Not Acceptable)			
		:		City	····	FL	Zip Code	
	Signature, typed or printed name of positived agent a containing is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!! After MAY 1, 200	Registered I FEE	d Agent signate IS \$150.0 will be \$5	ure required when r	EZ, President  Particular President  10. Election Campaign Financing  Trust Fund Contribution.	\$5.00 May Be Added to Fees	
`	ria on back)	. Make Check Payabi		partmen				
11.	OFFICERS AND DPTS		12.		DPTS	ODITIONS/CHANGES TO OFFICERS AND D	Change Addition	
TITLE  NAME  STHEET ADDRESS  GITY-ST-ZIP	LOPEZ-CANTERA, AMADA			E Et address - St-Zip	LOPEZ-CANTERA, AMADA 2300 Coral Way, Suite 201 Miami, Fl 33145			
Ţ!TLE NAME ,	SE CARTAYA, LIDIA	☐ Delete	TITLE NAME		VP			
STREET ADDRESS CITY-ST-ZIP	1717 N. Bayshore Drive, Ste114 Miami, Fl 33132			STREET ADDRESS 171		7 N.Bayshore Drive Ste.208		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		. Delete				8000041349 -05/03/0101	☐ Change ☐ Addition <b>3.48</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			12		¥₩₩¶50 <b>700</b> 00 9 <b>48</b> —- 3 141021	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete			7	5 (5 [ 2 (7 )   5   5   6   6   6   6   6   6   6   6	当老龍龍多本江三 Asalition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete				]	Change Addition	
indicated of the corp	on this report or supplemental report is poration or the receiver or trustee empor or on an attachment with an address, we have the control of the control o	true and accurate and that m wered to execute this report a	y signati	ure shall h	ave the same	119.07(3)(i), Florida Statutes. I further certif legal effect as if made under oath; that I am ida Statutes; and that my name appears in E	an officer or director	