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

FILED
Jun 04 1998 8:00am
Secretary of State

1998

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

DOCUMENT # P93000064390 (6)

HIGH ART TRANSLATIONS, INC.

[redacted]

1439 WEST AVE
APT 503
MIAMI BEACH FL 33139

Mailing Address
1439 WEST AVE
APT 503
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2.

2a. Mailing Address:
26

Suite, Apt. #, etc.
27

City & State
28

Country
25

Zip
29

Country
30

3. Date Incorporated or Qualified
09/15/1993

4. FEI Number
65-0446023

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 owes or has paid the current year taxable Personal Property Tax due June 30 [ ] Yes [ ] No

9. Name and Address of Current Registered Agent

REICHENBACHER, JEFFREY E
801 BRICKELL AVE
9TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85

11. Pursuant to Section(s) 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement of [illegible] to change its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. The corporation agrees to comply with the provisions of, Section 607.0505, Florida Statutes.

12. OFFICER AND DIRECTORS (Attach additional sheets if necessary) (Note: Registered Agent cannot resign when listed here)

DP
SAIZ DE LA MORA, PETER
1439 WEST AVE APT 503
MIAMI BEACH FL
[ ] DELETE

VTS
SAIZ DE LA MORA, PETER
1439 WEST AVE APT 503
MIAMI BEACH FL
[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

[ ] DELETE

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		

6/6/4

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-06/08/98--01131--012
***150.00

14. [illegible] does hereby certify that this filing does not qualify for the exemption stated in Section 119.07(3)(i), F.S. and that the facts stated in the foregoing report are true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a director 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 with an address.

SIGNATURE: