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

**PROFIT CORPORATION** 





FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000079804 (5)

A&P REGISTERED AGENT, INC.

SECRETARY OF STATE DIVISION OF CORPORATIONS 98 APR 21 PM 3: 06



			<u> </u>
Principal Place of Business	Mailing Address		1 Jenitest im saut teatt saut saut antit entit (Ent this felt bein din fall
2450 SW 137TH AVE. SUITE 226	2450 SW 137TH AVE. SUIT	TE 226	
MIAMI FL 33175	MIAMI FL 33175		DO NOT WRITE IN THIS SPACE
			3. Date Incorporated or Qualified
			09/15/1997
2. Principal Place of Business	2a. Mailing Address		4 FELNumber Applied For
21	26		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
22	27		Fee Required
City & State	City & State		6. Election Campaign Financing \$5.00 May Be
Žip Country	<b>28</b>	Country	Trust Fund Contribution Added to Fees
24 25	├ <b>─</b> ¬ '	oodnii y	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9. Name and Address of Current		<u> </u>	10. Name and Address of New Registered Agent
ALAYON, RICHARD A		81 Name	1016 1101 DOLD 1850
2450 <b>SW</b> 137TH AVE, SUITE 226		20 000000000000000000000000000000000000	vette trulpy (1) cor)
MIAMI FL 33175		82 Street Add	ress (P.O. BowNumber is Not Acceptable)
WILLIAM CE COLLO		83	10771
			1 th CUA
		84 City	iami FL 85 Zacon TV
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 though in the State of Torida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and cooperations of Section 607.0505, Florida Statutes.			
LOCALITIES TO THE LANGE TO THE LOCAL ALDINA			
Signature, typed or printed name of registered again, and title if applicable (NOTE: Re		Registereo Agent signature requi	
12. OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D	Ditte	1.1 TITLE	P, S, T, Change Change Change
NAME ALAYON, RICHARD A	100	1.2 NAME	eon Twette Halphen
STREET ADDRESS 2450 SW 137TH AVE, SUITE 2 CITY-ST-ZIP MIAMI FL 33175	20	1.3 STREET ADDRESS 21	180 SUS 131 AUF, SE CCC6
CITY-ST-ZIP MAMI FL 33175	<b>⊠</b> DELETE	1.4 CITY-ST-ZIP  2.1 TITLE	Change Addition
NAME PENA, MARY E	A	2.2 NAME	
STREET ADDRESS 2450 SW 137TH AVE, SUITE 2	26	2.3 STREET ADDRESS	7000 <u>024</u> 988336
CITY-ST-ZIP MIAMI FL 33175	.20	2.4 CITY-ST-ZIP	-04/24/9801005014
TITLE	☐ DELETE	3.1 TITLE	****150.00 ****150.00
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELE <b>te</b>	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY - ST - ZIP	
TITLE	DELET <b>E</b>	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP	this files does not evelify for	6.4 CITY-ST-ZIP	0

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 supplier explain 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 life 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 for on an attachment with an address.