FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 29, 2002 8:00 am Secretary of State

DOCUMENT # POCCOO	148317		04-29-2002	2 90147 041 ***150.00
TECHNOLOGY CENTER OF THE	- Americas, I	TAC.		
DO NOT WRITE	IN THIS S	641460		
2. Principal Place of Business 2601 S BAYSHARE DA	3. Mailing Address 2601 S B	Ayshaes Dr		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State HIAM , FL	City & State		4. FEI Number Applied For Not Applied For Not Applied For	
Zip 33133 Country 4	MIANI, 7	Country	5. Certificate of Status Desired	\$9.75 Additional
37773 854	77177	US#P	7. Name and Address of Current Re	Fee Required
	Name IN			
DO NOT WRITE			S (P.O. Box Number is Not Acceptable) O PCICKEL HVE .	
IN THIS SPACE		. *	SUTE 3000	
		City	MAYII	FL Zip Code
8. The above named entity submits this statement for	the purpose of changing its	registered office or regis		
SIGNATURE Signature, typed or proved name of registered agent and tide of applicable. (NOTE: Registered Agent signature requirement and elects to do so. (See criteria on back) Signature, typed or proved name of registered agent and tide of applicable. (NOTE: Registered Agent signature requirement and elects to do so.) January 1 - May 1 - Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of St			10. Election Campaign Financ	cing \$5.00 May Be Added to Fees
11. OFFICERS AND C	The second of th			^ C }
THE DP NAME MANUEL D MEDINA STREET ADDRESS 260 5 DAYSHADE CITY-ST-ZIP MAYUL FL 33	On, 9TH FZ 133	TITLE NAME STREET ADDRESS CITY-ST-ZIP		AAB 173701
TITLE DYPS NAME BRIAN K GOODKIND STREET ADDRESS 2601 S BAYSHOUS IN, 974 FZ CITY-ST-ZIP MIAM, FZ 35/33		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S S S S S S S S S S S S S S S S S S S	
TITLE VPT NAME SAMUEL D. SCHULMAN STREET ADDRESS GO! BISCAYNE BUYD CITY-ST-ZIP PLAMI, FL 33 132		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33132		TIYLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE	
TITLE AS RABEPT D SICHTA STREET ADDRESS CITY-ST-ZIP NIAMI, FL 33133		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
NAME STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the		TITLE NAME STREET ADDRESS CITY-ST-7IP	Table 1100(N)()	

indicated on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

Research

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/02

305-856-3200

Daytime Phone #

ATTACH # PODOOOOY8817/6411

2601 South Bayshore Drive Suite 900 Miami, Florida 33133 305-856-3200 305-856-8190 (fax)

Technology Center of the Americas, Inc.

April 22, 2002

Via Courier

Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

RE:

2002 Uniform Business Report

Sirs:

Enclosed please find the Company's 2002 Uniform Business Report, together with a check in the amount of \$150.00, intended to cover the necessary filing fee.

Thank you for your good attention in this matter.

Very truly yours,

Assistant Secretary

Enclosures as noted ·