2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 178476** May 02, 2000 8:00 am Secretary of State 1. Entity Name AMERICA CAPITAL CORPORATION 05-02-2000 90108 030 ***150.00 Principal Place of Business Mailing Address 4521 PGA BLVD. 1221 BRICKELL AVE. STE 2650 MIAMI FL 33131 SUITE 211 PALM BEACH FL 33418-3997 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc Suite 211 Suite 211 16th Applied For City & State PATM BEACH BRADENS 4. FEI Number 59-254 1893 VAIM BEACH GARDENS Not Applicable Country USA **\$8.75** Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name CORPORATE CREATIONS ENTERPRISES, INC. Street Address (P.O. Box Number is Not Acceptable) 4521 PGA BOULEVARD **SUITE 211** PALM BEACH GARDENS FL 33418 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS ☐ Addition Delete TITLE TITLE COOK, STEVEN NAME NAME STREET ADDRESS 1221 BRICKELL AVE.,#2650 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Addition ☐ Change ☐ Delete TITLE TITLE BURSTEIN, JACK D NAME NAME 1221 BRICKELL AVE., #2650 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** ☐ Addition TITLE ☐ Delete MARLIN, ROBERT NAME NAME STREET ADDRESS STREET ADDRESS 1221 BRICKELL AVE., #2650 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 ☐ Change ☐ Addition TITLE Delete TITLE **TOLIN. FRANK** NAME NAME STREET ADDRESS 1221 BRICKELL AVE., #2650 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33131** Addition -☐ Change TITLE ☐ Delete TITLE Hanold Brown 1221 Brichall Are #2650 NAME NAME STREET ADDRESS STREET ADDRESS Miami, Fl 33137 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Chande ☐ Delete TITLE TITLE Sest Duences NAME NAME

13. 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 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

1721 Brickell

, FI 33/31

305-536-1400

Daytime Phone #