| DOCU<br>1. Entity Nam  | MENT # 214743   | REPORT   |  | FILED<br>Mar 23, 2005 08:00 A<br>Secretary of State  |
|--|---|--|--|--|
| •  | e of Business<br>6TH STREET, SUITE 440<br>3166  | Mailing Address<br>8033 N.W. 36TH STRE<br>MIAMI, FL 33166  | ET, SUITE 440                                      |  |
| 2. Principal Place of Business_  |   | 3. Mailing Address   |  |  |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, etc.  |  | 02042005 Chg-P CR2E034 (10/03)   |
| City & State   |   | City & State   | <u></u>  | 4. FEI Number Applied For<br>59-0821865 Not Applicat   |
| Zip  | Country   | Zip  | Country  | 5. Certificate of Status Desired Sequence \$8.75 Additional Fee Required   |
|  | 6. Name and Address of Current  | Registered Agent   | Name   | 7. Name and Address of New Registered Agent  |
| ISICOFF, ERIC D ESQ_<br>1101 BRICKELL AVENUE<br>SUITE 704<br>MIAMI, FL 33131<br>8. The above named entity submits this statement for the |   |  |  | ress (P,O. Box Number is Not Acceptable)   |
|  |   |  |  |  |
|  |   |  | City   | FL <sup>Zip Code</sup>   |
| <br>FIL  | Signature, typed or printed name of registered agent<br>E NOWIII FEE IS \$150.00<br>ay 1, 2005 Fee will be \$550.<br>OFFICERS AND | 9. Election Campa<br>OO Trust Fund Con   |  | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | V<br>RIBADENEIRA,DIEGO<br>8033 NW 36TH STREET<br>MIAMI, FL  |  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP     | Change Additi  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   | VS<br>RIBADENEIRA, DANIELA<br>8033 NW 36 ST. STE. 440<br>MIAMI, FL  | Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP     | 00000273528 □ Change □ Additi<br>03/23/05-80032-018 150.00   |
| NTLE<br>VAME<br>STREET ADDRESS<br>CITY - ST - ZIP  |   | Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP     | 🗋 Change 📋 Additi  |
| IITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP   |   | Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIF | 🗌 Change 🔲 Additi  |
| NTLE<br>NAME<br>STREET ADDRESS<br>DITY - ST - ZIP  |   | Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY/ST-ZIP     | Change 🗌 Addits  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | $\square$   | Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP     | 🗋 Change 📑 Additi  |
| 12. I hereby c<br>indicated<br>of the corr<br>changed,<br>SIGNAT   |   | this filing does not qualify to<br>a true and accurate and that<br>owered to execute this report<br>with all other like empowered<br>TRINTED NAME OF SIGNING OFFICER | DIEGO RI   | in Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director of 607, Florida Statutes; and that my name appears in Block 10 or Block 11 $\frac{OADENEIRA}{3/18/05}$ |