2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 301414 Apr 03, 2000 8:00 am **Secretary of State** BRISTOL, CHILDS & ASSOCIATES, INC. 04-03-2000 90155 007 ***158.75 Mailing Address Principal Place of Business Same 4012 SALZEDO XIREEK COOPAR BABLESTEE BOYAR %\$ 9360 S.W. 72nd Street, Ste. 250 Miami, Florida 33173-3292 2. Principal Place of Business 3. Mailing Address 9360 S.W. 72nd Street 9360 S.W. 72nd Street Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite 250 Suite 250 Applied For City & State City & State 4. FEI Number 59-1500298 MIAMI, FLORIDA FLORIDA · MIAMI, Not Applicable Zio Country Country \$8.75 Additional X 5. Certificate of Status Desired 33173-3292 USA Fee Required 33173-3292 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VICTOR F. ARMONT ARMONT, VICTOR F Street Address (P.O. Box Number is Not Acceptable) 9360 S.W. 72nd Street 9360% S.W. 72nd Street, 4012:SALZEBOXST OURALXOABNES X 1X XXX46 Suite 250 Suite 250 33173-3292 Miami, Fl Zip Code 33173-329 Miami, 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 President SIGNATURE 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 Tax filing requirement and elects to do so. After, MAY 1; 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) \Box Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PTSD Change Addition ☐ Delete TITLE TITLE ARMONT, VICTOR F. NAME NAME . 9360 S.W. 72nd Street, Ste. 250 4012 SALZEDO ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Coral Gables fl Miami, Florida 33173-3292 ☐ Defete TITLE FERNANDEZ, ADOLFO NAME NAME 9360 S.W. 72nd Street, Ste. 250 STREET ADDRESS STREET ADDRESS 4012 SALZEDO ST Miami, Florida 33173-3292 CITY-ST-ZIP CORAL GABLES FL CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

(305)275-1311

3/28/00

President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR