Suite, April #, etc.    Suite, April #, etc.		PROFIT RPORATION UAL REPORT  1996	FLORIDA DEPA Sandra Secret	ARTMENT OF STATE B. Mortham lary of State CORPORATIONS		
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2. Principal Passe of Business   2. Moting Abdrass   2. Moting Abd			95 MERRICK WAY			
SUBJOURNEY & FOLK APPLY	· · · · · · · · · · · · · · · · · · ·		attn: Robert	M. Kretomen		
Sullo, April #, etc.    Sullo, April #, etc.	2. Principal F	Place of Business	F			
City & State    City & State   City	Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			\$8.75 Additional
Zep   Country   Zep   Gountry   Zep   Gountry   Set   This corporation has liability for interrigible tax uniter's 199 0582,   Yes   No   No   Set   No   No   No   Set   No   No   No   No   No   No   No   N	City & Stat	te	City & State			\$5.00 May Be
GONZALEZ-PITA, J. ALBERTO, ESO. 200 S BISCAYNE BLVD 50TH FLOOR MIAMI FL 33131  82 Street Address (P.O. Box Number is Not Acceptable)  83 Acry FL 85 Zip Code  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 charging its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, in an accept the obligations of, Section 607.0502 hereby statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  14. THILE  15. THILE  15. THILE  16. SIMERI ADDRESS  16. SHERRICK WAY  16. SHERRI ADDRESS  16. SHERRICK WAY  17. STATE  18. SHERRI ADDRESS  18. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12  19. THILE	Zip 24	— · ·	Zip	_ ·	8. This corporation has liability for	intangible tax under s 199.032,
GONZALEZ-PITA, J. ALBERTO, ESO. 200 S BISCATYNE BLVD 50TH FLOOR MIAMI, FL 33131  48 City  FL 85 Zip Code  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 charging its registered office or registered agent, or both, in the State of Foreias. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a registered agent, and accept the displaces of, Socion 607,0506, A florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  12. NAME  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City -51-7P  10. SIMPLE ALORES  50 MERRICK WAY  13. SIREFI ADDRESS  14. City -51-7P  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. SIMPLE ALORES  50 MERRICK WAY  13. SIREFI ADDRESS  14. City -51-7P  10. Change Addition  14. This  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. Change Addition  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDIT		9. Name and Address of Cu				_
200 S BISCAYNE BLVD 50TH FLOOR MIAM! FL 33131  83  84 City FL 85 Zip Code  FL 85 Zip Code  FL 97 City is statement for the purpose of charging its registered office corregistered agont, or both, in the State of Riverde, Such charge was authorized by the corporation submits this statement for the purpose of charging its registered decident is with, and accept the obligations of Section 607.050S, Florida Statutes.  SIGNATURE  SIGNATURE  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. CITY ST 7P  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	GONZA	LEZ-PITALL ALBERTO ESQ				
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 familiar with, and accept the obligations of Scientin 607,0502, horized by the opporation's board of directors. I hereby accept the appointment as registered office familiar with, and accept the obligations of Sciento 607,0502, horized Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered eigent. I am State of Florida. Such change was surfrorized by the corporation's board of directors. I hereby accept the appointment as registered eigent. I am State Application of the provision of the purpose of the appointment as registered eigent. I am Title    DELETE	200 S 8	BISCAYNE BLVD 50TH FLOOF	3	82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
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 agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS'CHANGES TO OFFICERS AND DIRECTORS IN 12  TIFLE  COOLER, LAMARR  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DVT  WALTERS, ROBERT G.  95 MERRICK WAY  23 SIRRET ADDRESS  CORAL GABLES FL  14 CITY-SI-ZIP  DVA  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DVA  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DVA  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DVA  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DVA  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  PD  ARON, ADAM M.  95 MERRICK WAY  CORAL GABLES FL  14 CITY-SI-ZIP  DILE  DI	MIAM! F	FL 33131		62		
11. Pursuant to the puryosions of Sections 607.0502 and 607.1500, Florida Statutes, the above-named corporation submist this statement for the purpose of changing its registered office or registered agent, or both, in the State of Priorida, Such change was without and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, Injury or present rare of registered agent agen				[63]		
SIGNATURE    Continue						85 Zip Code
Signature, lyted or printed rare of engisted algorithal to stell appointed and the flappointed appril and site if appointed and site if appointed and site if appointed appril appril and site if appointed appril appri	11. Pursuant	to the provisions of Sections 607.0	1502 and 607.1508, Florida Statute	84 City	ration submits this statement for the pur	PL
THE VDS COOLER, LAMARR 95 MERRICK WAY 1.3 STREET ADDRESS COTY-ST-ZIP DY WALTERS, ROBERT G. 22 NAME STREET ADDRESS GENERAL 22 STREET ADDRESS COTY-ST-ZIP DY CORAL GABLES FL 3.1 TITLE 3.2 STREET ADDRESS COTY-ST-ZIP DELETE 3.1 TITLE 3.3 STREET ADDRESS COTY-ST-ZIP DELETE 3.3 STREET ADDRESS COTY-ST-ZIP DELETE 5.1 TITLE 3.3 STREET ADDRESS 5.4 COTY-ST-ZIP 5.2 NAME 5.3 STREET ADDRESS 5.4 COTY-ST-ZIP	familiär w	to the provisions of Sections 607.0 red agent, or both, in the State of F ith, and accept the obligations of, S	502 and 607.1508, Florida Statute Florida. Such change was authorize Section 607.0506, Florida Statutes.	84 City	ration submits this statement for the pur and of directors. I hereby accept the app	PL
NAME STREET ADDRESS OTHER LAMARR STREET ADDRESS OTHER LAMA	familiär w SIGNATURE	ith, and accept the obligations of, §	Section 607.0505, Florida Statutes.	84 City s, the above-named corporation's boa	ird of directors. Thereby accept the app	rpose of changing its registered office ointment as registered agent. I am
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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 12 or Block 13 if changes or or an attachment with an address.

SIGNATURE:

Robert M. Kritzman 4/8/96 (305) 447–9660

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date