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HB18 MAMI BCH FL 33160 Fig. Fi							1->
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Internation the provisions of Sectors 607 (5:02 and 607 1500; Florida Statutes; the above-named corporation submits this statement for the purpose of changing its registered agent in the State of Florida Statutes; the above-named corporation's board of directors. Thereby accept the appointment as registered agent in the state accept the object submits. State accept the appointment as registered agent in the state accept the appointment as registered agent in the state accept the appointment as registered agent in the state accept the appointment as registered agent in the appointment as registered agent agents when writeregit State OFF FICERS AND DIFE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Inte ST OFF FICERS AND DIFE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Inte ST OFF FICERS AND DIFE CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Inte DELETE 11 The 12 at Mate 13 Streft Accepts 0 failed accept the appoint agent agen	MIA	MI BCH FL 33160			83		
11. Processor to the provisions of Sections 607 (5002 per def) (500, Eprint & Statutes, the above named comparation submite this statement for the purpose of changing its registered agent of bench on the Statute of Ends or well have a bound of directors. Thereby accept the appointment as registered agent fails for the statutes. SIGNATURE Signature to the number of the statute of Ends of Social of OZOSO, Forida Statutes. MATE 12. OFFICERS AND DIFECTORS 13. 14. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 Intel 17. OFFICERS AND DIFECTORS 13. 18. ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12 19. Statutes. Intel 10. OFFICERS AND DIFECTORS IN 12 Intel 11. Intel Intel OFFICERS AND DIFECTORS IN 12 19. ADUER, ELAYNE Intel Intel 19. ADUER, FLADOLD Intel Intel 19. ADUER, FLADOLD 211 NEL Intel 19. A DELEYE 211 NEL Intel 19. Intel Intel Intel 19. ADUER, FLADOLD 211 NEL Intel 19. Intel Intel Intel Intel <tr< th=""><th></th><th></th><th></th><th></th><th>84 City</th><th></th><th>FI 85 Zip Code</th></tr<>					84 City		FI 85 Zip Code
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14. I do hereby cert/y 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.	THLE NAME STHEET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME STREET ADDRESS CHY-ST-ZIP THLE NAME SYREET ADDRESS CHY-ST-ZIP THLE	PD ADLER, HAROLD 301 174TH ST, # N MIAMI BCH, FL	1818	DELETE	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition Change Addition Change Addition Change Addition Addition Addition
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SIGNATURE: MARIA Liker PRESIDENT 305-935-2561	TITLE NAME STHEET ADDRESS C(TY-ST-ZIP TITLE NAME STREET ADDRESS C(TY-ST-ZIP TITLE NAME STREET ADDRESS C(TY-ST-ZIP TITLE NAME STREET ADDRESS C(TY-ST-ZIP TITLE NAME STREET ADDRESS C(TY-ST-ZIP TITLE NAME STREET ADDRESS C(TY-ST-ZIP TITLE NAME	PD ADLER, HAROLD 301 174TH ST, # N MIAMI BCH, FL by certify that the infor on indicated on this and officer or director of the	1818 00000	DELETE DELETE DELETE DELETE DELETE filing does not quali ta' annual report is t er or trustee empox	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 1.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.4 STREET 5.4 STREET 5.5 STREET 5.5 STREET 5.5 STREET 5.5 STREET 5.5 STREET 5.5 STREET	at my signature shall have the same lega	Change Addition Addition Change Addition Addition Change Addition