	<ol> <li>Entity Name</li> </ol>	MENT # 428619	FILED Feb 26, 2000 8:00 am Secretary of State 02-26-2000 90011 012 ***150.00					
	Principal Place	e of Business	Mailing Address		_	02-20-2000 9001	1012 15	0.00
Suite. Apt. 4, etc.     DO NOT WHITE NL THES SPACE       City & State     City & State       Zip     Country       Zip     Country       Country     Zip       Signatin Countre and addrese of Country       Sign	746 NW 21ST 1 IAMII FL 33142 S		MIAMI FL 33142-7437					
City & State City	2. Principal Pla	lace of Business	3. Mailing Address					
City State     Op Gutter     State     State     State       Zip     Country     Zip     Country     S. Certificate of State Defined     State State Defined       City     S. Certificate of State Defined     State Defined     State State Defined     State State Defined       City     S. Certificate of State Defined     State Defined     State State Defined     State State Defined       State Defined     Name     Name     Name     Name     Streat Address of New Registered Agent       Streat Address (PO, Box Number is Net Acceptable)     Streat Address (PO, Box Number is Net Acceptable)     Streat Address (PO, Box Number is Net Acceptable)       Streat Address (PO, Box Number is Net Acceptable)     Streat Address (PO, Box Number is Net Acceptable)     Defined       Streat Address (PO, Box Number is Net Acceptable)     Defined     Streat Address (PO, Box Number is Net Acceptable)       Streat Address (PO, Box Number is Net Address of New Address (PO, Box Number is Net Acceptable)     Defined     Streat Address (PO, Box Number is Net Acceptable)       Streat Address of Net Address of Net Address of Net Address (PO, Box Number is Net Address of Net Address (PO, Box Number is	Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	IIS SPACE	
Cettrace of charge of New Registered Agent     Agen	City & State	9	City & State		4. FEl Number	59-1478317		
BETANCOURT, JESUS 3020 SW to AVE MAMI FL     Name       BETANCOURT, JESUS 3020 SW to AVE MAMI FL     Street Address (P.O. Box Number is Not Acceptable)       City     FL     Zip Code       I. 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.     More registered agent: or both, in the State of Florida.       INDIATORE     Septime type or printed cace of registered agent or both, in the State of Florida.     More registered agent, or both, in the State of Florida.       INDIATORE     Septime type or printed cace of registered agent, or both, in the State of Florida.     More registered agent, or both, in the State of Florida.       INDIATORE     Septime type or printed cace of registered agent, or both, in the State of Florida.     More registered agent, or both, in the State of Florida.       INDIATORE     FILE NOW!!! FEE IS \$150.00 Atter MAY 1, 2000 Fee will be \$550.00 (See criteria on back)     Intel Florida, State of Printed State of State of State of State of Printed Printed S	Zip	Country	Zip	Country	5. Certificate of S	tatus Desired		
BETANCOURT, JESUS 3020 SW 80 AVE MAMI FL       Street Address (PD. Box Number is Not Acceptable)         OTV       FL       Zip Code         OTV       FL       State of Process And State of Process And Diffectors       Diffectors Control on a control		6. Name and Address of Curre	nt Registered Agent		7. Name and Add	iress of New Register	ed Agent	
3020 SW 80 AVE MAMI FL  City FL Zip Code  C				Name				
City     FL     Zip Code       In the above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both. In the State of Florida.     Inter constraints and registered agent systement agent, or both. In the State of Florida.       AIGNATURE	3020	SW 80 AVE		Street Addres	ss (P.O. Box Number is	Not Acceptable)		
	MIAM	11 FL		City			Zin Code	
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Inte       NAME         NAME       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         I3. 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.	Tax filing re (See criteri ITLE IAME STREET ADDRESS SITY-ST-ZIP ITLE IAME STREET ADDRESS CITY-ST-ZIP ITLE STREET ADDRESS CITY-ST-ZIP ITLE STREET ADDRESS CITY-ST-ZIP ITLE ITLE ITTLE ITTLE ITTLE ITTLE	P BETACCOURT, JESUS 3020 S.W. 80 AVE MIAMI FL V BETANCOURT, MIGUEL 1840 S.W. 75 AVENUE MIAMI FL V BETANCOURT, CARLOS 1300 S W 86 COURT	ble FILE NOW After MAY 1, 2 Make Check Pays Delete	/!!! FEE IS \$150.00         (000 Fee will be \$550.0)         (017 - ST-ZIP         (017 - ST-ZIP <td>10. Electio Trust Fi</td> <td>n Campaign Financing und Contribution.</td> <td>Ádded AND DIRECTORS     Change     Change     Change     Change     Change</td> <td>I to Fees</td>	10. Electio Trust Fi	n Campaign Financing und Contribution.	Ádded AND DIRECTORS     Change     Change     Change     Change     Change	I to Fees
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