| DOCUMENT         #         565563         (2)           Consolid - Name         Set 15 0 MAIL NEEKE         Set 17 0 2000         Mail Mail Neekee         Set 17 0 2000         Mail Net 2000         Mail Net 2000         Mail Net 2000         Set 17 0 2000         Set 17 0 2000         Set 17 0 2000         Set 17 0 2000         Mail Net 2000         Mail Net 2000         Set 17 0 2000         Set 10 0 2000 </th <th>ANN</th> <th>PROFIT<br/>RPORATIO<br/>UAL REPO<br/><b>1996</b></th> <th></th> <th></th> <th></th> <th>B Morthan</th> <th>n<br/>&gt;</th> <th></th> <th></th> <th></th> <th></th> <th></th>  | ANN   | PROFIT<br>RPORATIO<br>UAL REPO<br><b>1996</b>                                 |   |  |   | B Morthan   | n<br>>   |   |                                 |   |   |   |
|--|---|---|---|--|---|---|--|---|---------------------------------|---|---|---|
| Principal Place of Business Set So. LAWA HATINE SET SO. LAWA HATIN | 1. Corporatio   | on Name   |   | 3  | (2)   |   |  |   |                                 |   |   |   |
| Set 30. JANA WENUE     Set 50. MAAL AVENUE       Set 30. JANA WENUE     Set 50. MAAL MEL 2012       Set 30. JANA WENUE     Set 50. MAAL MEL 2012       Set 30. JANA WENUE     Set 50. MAAL MEL 2012       Set 30. JANA WENUE     Set 50. MAAL MEL 2012       Jana Wenue JANA JANE Set 2011     Set 50. MAAL MEL 2012       Jana Wenue JANA JANE Set 2011     Set 50. MAAL MEL 2012       Jana Wenue JANA JANE Set 2011     Set 50. MAAL AVENUE       Jana Wenue JANA JANE Set 2011     Jana Wenue JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana Wenue JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana Wenue JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana Wenue JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana Wenue JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana JANA JANE Set 2011       Jana Wenue JANA JANE Set 2011     Jana JANA JANE Set 2011       Jana Wenu   | ELEN/   | a R. Marti  | inez, M.D., P.A.  |  |   |   |  |   |                                 | ) <u>)</u><br>}}]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]]] |   |   |
| STE 60<br>MAM IF 2 3013-2414       STE 61<br>MAM IF 2 3132-2414       Stell House<br>District Part of District Part of Distret Part of District Part of District Part of D   | •   |   |   | Mailing /  | Address   | ····· <i>·</i> -····  |  |   |                                 |   |   |   |
| PL Principal Place de Business         2a. Maling Address         4. Fit Number         Applied for<br>596 - 7929009         Applied for<br>597 - 7929009           Suite, Apt #, etc.         Soite, Apt #, etc.         Apt #, etc.         Apt #, etc.         Apt #, etc.         Soite, Apt #, etc.         Soite, Apt #, etc.         Soite, Apt #, etc.  | STE 801   |   |   | STE 8  | 901   | UE  |  |   | Qualified                       |   |   |   |
| Suite, Age, K., etc.     Suite, Age, K., etc. <th>- ·</th> <th>lace of Busines</th> <th>S</th> <th></th> <th>ng Address</th> <th></th> <th></th> <th>4. FEI Number</th> <th></th> <th>03/07</th> <th>A</th> <th>pplied For</th>  | - ·   | lace of Busines   | S   |  | ng Address  |   |  | 4. FEI Number   |                                 | 03/07   | A   | pplied For  |
| City & Statie  | -1 '  | #, etc.   |   | Suite  | ), Apt. #, etc.   |   |  |   | Desired                         |   | B.75  | Additional  |
| 20       Country       20       Country       8. The coporation the list bit or interplate the under is 180.032.         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         MARTINEZ, ELENA R.       300       10. Name and Address of New Registered Agent         MARTINEZ, ELENA R.       60       60         306 15. MAMAM AVE, STE 801       61       62         MARTINEZ, ELENA R.       62       Struct Address 07.00 Acceptable)         64       City       FL       85         71. Present to the proteiners 60 0000 and 600 1000. Foreid Statutes. The opportunities the statement for the proteiner address to thoruging its registrand of the composition's board of ancients. Therefore, address the appointment as registered agent. I am Statute of foreins and address to the appointment are registered agent. I am Statute the appointment are registered agent. I am Statute of foreins and address to the appointment are registered agent. I am Statute of foreins and address to optical address to the appointment are registered agent. I am Statute Address and a ddress to optical address and addr   |   | e   |   | City 8   | & State   |   |  |   |                                 | <u>ст</u> \$  | 5.00  | May Be  |
| MARTINEZ, ELENA R.<br>Seet S. MIAMI AVE, STE BO1<br>MIAMI FL 33133       Image: Step Step Step Step Step Step Step Step  | -   |   | 5   | 29   |   | <u>⊢</u>  | ltry   | Florida Statutes  | 🗶 Yes                           | tangible tax uno                                    | ders 1  |   |
| Self S. MANI AVE, STE 801<br>MAMI FL 33133       Ended Address (P.O. Box Number is Not Acceptable)         II. P. Presign to the provelence of Sections 607 0502 and 607 1500. Floreds Statutes, the above named comportion submits this statement for the purpose of changing its registered again. Tam<br>or registered agains or both, in the State of Floreds. Statutes.       Bit 20, Code         Signature Team are with, and accept the calculations of a state and the comportion submits the statement for the purpose of changing its registered again. Tam<br>and accept the calculations of Section 607 0505. Floreds Statutes.       Post the above number of adapting the registered again. Tam<br>and accept the calculations of Section 607 0505. Floreds Statutes.         Science Team are with a state of print have of p  | MADTIN  |   |   | t Hegistereo .   | Agent   |   | 31 Name  | 10. Name and Address  | of New Re                       | gistered Agen                                       | ht  |   |
| 44       City       EL       85       Zip Code         F1.       Pursuant to the provisions of Sections 607 0002 and 607.1508. Fiorida Statutes, the above named corporation submits this statement for the purpose of range to discuss of section 607.0002. Incode Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent. Fan         SIGNATURE       PO       PO       PO       PO         11.       PO       OFFICE PIS AND DIRE CLOINS       18.       ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12         12.       OFFICE PIS AND DIRE CLOINS       19.       ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12         13.       MARTINEZ, ELENA R.       0FLICE       1 1 INT#       0 Change       Addition         13.       ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12       1 2 NMA       1 2 NMA       1 3 SINET ADDRESS         MARTINEZ, ELENA R.       0FLICE       1 1 INT#       1 2 NMA       1 2 NMA       1 3 SINET ADDRESS         NRET ADDRESS       13.       ADDITIONS/CHANGES TO OFFICE RS AND DIRECTORS IN 12       1 Addition         NRET ADDRESS       1 3 SINET ADDRESS       1 3 SINET ADDRESS       1 4 Addition         NRET ADDRESS       3 SINET ADDRESS       2 3 NME       2 AMAE       2 3 NME         NRET ADDRESS       3 SINET ADDRESS       3 SINET ADDRESS       3 SINET   | 3661 S.   | MIAMI AVE,  |   |  |   |   |  | ress (P.O. Box Number is Not  | Acceptable                      | )   | <u> </u>  |   |
| Pursuant to the provisions of Socions 607 0502 and 607 1508. Portial Statutes, the above needed concertion is board of directors. Thereby accept the appointment is registered office framilar with, and accept the obligations of socion 607 0509. Portial Statutes.  SIGNATURE Signate that or portion of reprind and registered office frame.  POINT Point accept the obligations of socion 607 0509. Portial Statutes.  POINT Point accept the obligations of social Statutes.  SIGNATURE  Signate that or portion of reprind and registered office frame.  POINT Point Point Societ Point      | MIAMI F   | FL 33133  |   |  |   |   |  |   |                                 |   |   | • • • • • • • • • • • • • • • • • • •   |
| 11. Present to the provisions of Sociars 607.0502 and 607.1508. Findia Statutes, the above named composition's board of directors. Thereby accept the appointment as registered agent. I am of the provisions of Sociars 607.0509, Findia Statutes.         SIGNATURE       Section 607.0502, Findia Statutes.         SIGNATURE       Section 607.0502, Findia Statutes.         SIGNATURE       Section 607.0500, Findia Statutes.         SIGNATURE       OFFICERS AND DIRECTORS         12.       OFFICERS AND DIRECTORS         0.011. Composition's provide agent and at a prictam.       PDI         Martinez, ELENA R.       Intri         Signate toword provide agent and at a prictam.       PDI         Martinez, ELENA R.       Intri         Signate toword       Signate toword provide agent and at a prictam.         Martinez, ELENA R.       Intri         Signate toword       Signate toword price agent  |   |   |   |  |   |   |  |   |                                 |   | ······  | 0.1.  |
| SIGNATURE     Of ICCE PS and the Big Mead     POIL     Poils Register Appendix due to the meaning of the Psilon Appendix and the Big Mead Appendix Appendix and the Big Mead Appendix Appendi   | -   |   |   |  |   |   |  |   |                                 |   | 1 .   |   |
| 12.       OFFICE FIS AND DIFFECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 12         Inte       PD       DELETE       11 TOLE       Change       Addition         WWE       MARTINEZ, ELENA R.       12 NAME       12 NAME       Change       Addition         SIREET ADDRESS       3681 S MIAMI AVE #801       13 STREET ADDRESS       14 CDY-S1-2P       Inte       Change       Addition         UP: 51-2P       MIAMI FL       DELETE       2 TITLE       2 TITLE       Change       Addition         SIREET ADDRESS       23 STREET ADDRESS       23 STREET ADDRESS       Change       Addition         UP: 51-2P       MAME       3 STREET ADDRESS       24 GTY-S1-2P       Inte       Change       Addition         SIREET ADDRESS       23 STREET ADDRESS       33 STREET ADDRESS       Change       Addition         UP: 51-2P       34 CDY-S1-2P       24 GTY-S1-2P       Inte       Change       Addition         SIREET ADDRESS       33 STREET ADDRESS       33 STREET ADDRESS       Inte A  | <ol> <li>Pursuant t<br/>or register<br/>familiar wit</li> </ol>   | to the provision.<br>ed agent, or bo<br>the and accept t                      | s of Sections 607.0502<br>th, in the State of Florid<br>the obligations of, Sectio                                | and 607,1508<br>la Such chanc                              | <ol> <li>Florida Statutes</li> <li>Was authorize</li> <li>Florida Statutes</li> </ol> | s, the above  |  | ration submits this statement t<br>ard of directors. I hereby accep | for the purple<br>of the appoir |   |   |   |
| HILE       PO       DELETE       1 1 INLE       Change       Addition         WWE       MARTINEZ, ELENA R.       13 SIREI ADDRESS       13 SIREI ADDRESS   | familiar wit<br>SIGNATURE   | ith, and accept i   | the obligations of, Section   | on 607.0505, 1   | Florida Statutes.   | s, the above<br>of by the co  | e named corpo<br>rporation's boa   | ind of directors. Thereby accep                                     | for the purple<br>of the appoir | <b>FL</b><br>pse of changing<br>ntment as regis     |   |   |
| SIREELADDRESS       3661 S MIÁMI AVE #801       13 SIREELADDRESS         DIT-S1-2IP       MIAMI FL       14 C1Y-S1-2IP         ITHE       2 ITHE       2 ITHE         SIREELADDRESS       22 SIREELADDRESS         DIT-S1-2IP       2 Change         Addition       3 SIREELADDRESS         DIT-S1-2IP       4 C11Y-S1-2IP         TILE       DELETE         S1SIREELADDRESS       3 SIREELADDRESS         S1Y-S1-2IP       4 SIREELADDRESS         S1Y-S1-2IP       4 SIREELADDRESS         S1Y-S1-2IP       Change       Addition         S1X-S1-2IP       Change       Addition         S1X-S1-2IP       Change       Addition         S1X-S1-2IP  | familiar wi<br>IGNATURE<br>2.   | Signature typod or p  | the obligations of, Section   | on 607.0505, ]<br>and little if applicable<br>D DIRE CTORS | Florida Statutes.   | is, the above<br>of by the co   | e named corpo<br>rporation's boa   | ec when reinstating   | the appoir                      | DSE of changing<br>ntment as regis                  | g its req<br>tered a  | gistered offic<br>igent. I am   |
| Internation       14 CitY-St-2iP         Intel       DELETE       2 1 Title         Change       Addition         Came       22 SAREE         Sincer Address       23 Sheet Address         Inte       24 CitY-St-2iP         Inte       3 Sineet Address         Sineet Address       33 Sineet Address         Sineet Address       33 Sineet Address         Sineet Address       34 CitY-St-2iP         Inte       DELETE       3 Title         Inte Addres       10 DELETE       3 Sineet Address         Inte Addres       10 DELETE       4 Title         Address       4 Sineet Address       4 Sineet Address         Inte Address       4 Sineet Address       4 Sineet Address         Inte Address       10 DELETE       5 TitLe       Change       Address         Inte Address       10 DELETE       5 TitLe       Change       Address         Inte Address       10 DELETE       5 TitLe       Change       Address         <  | familiär wi<br>NGNATURE<br>2.   | Signature typed or p  | the obligations of, Section<br>within mine of registered agent a<br>OF FICE RS AND                                | on 607.0505, ]<br>and little if applicable<br>D DIRE CTORS | Florida Statutes.   | is, the above<br>of by the co<br>It. Registered A<br><b>13.</b><br>1 1 TITL   | e named corpo<br>rporation's boa<br>gent signature require<br>E  | ec when reinstating   | the appoir                      | DATE<br>DATE<br>ERS AND DIRE                        | g its reg<br>tered a  | gistered offic<br>igent. I am<br>S IN 12  |
| ave       2 1 mile   | familiar wi<br>BIGNATURE<br>2.<br>ITLE<br>AME   | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, ]<br>and little if applicable<br>D DIRE CTORS | Florida Statutes.   | s, the above<br>of by the co<br>it Registered A<br>13.<br>1 1 178L<br>1 2 NAM   | e named corpo<br>rporation's boa<br>gent signature require<br>.E.<br>.E.   | ec when reinstating   | the appoir                      | DATE<br>DATE<br>ERS AND DIRE                        | g its reg<br>tered a  | gistered offic<br>igent. I am<br>S IN 12  |
| SIREEL ADDRESS       23 STREEL ADDRESS         CITY - ST - ZP       24 CITY - ST - ZP         TILE       2 LA CITY - ST - ZP         TILE       31 TITLE         SIREEL ADDRESS       33 STREEL ADDRESS         TITY - ST - ZP       34 CITY - ST - ZP         TILE       31 STREEL ADDRESS         TITLE       11 LILE         AME       12 NAME         STREEL ADDRESS       33 STREEL ADDRESS         TITLE       11 LILE         AME       12 NAME         STREEL ADDRESS       44 CITY - ST - ZP         TITLE       11 LILE         TITLE       11 LILE         TITLE       11 LILE         TITLE       11 TITLE         STREEL ADDRESS       33 STREEL ADDRESS         TITY - ST - ZP       44 CITY - ST - ZP         TITLE       11 LILE         STREEL ADDRESS       13 STREEL ADDRESS         TITY - ST - ZP       54 CITY - ST - ZP         STREEL ADDRESS       53 STREEL ADDRESS         TITY - ST - ZP       54 CITY - ST - ZP<  | familiar wi<br>SIGNATURE<br>2.<br>TILE<br>AME<br>TREET ADDRESS<br>ITY-ST-2IP  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, ]<br>and litle II ar plicate<br>D DIFR C1 ORS | Delete  | s, the above<br>of by the co<br>t. Registered A<br><b>13.</b><br>1 1 TiTL<br>1 2 NAM<br>1.3 STRE  | e named corpo<br>rporation's boa<br>gent signature require<br>E<br>E<br>E<br>E<br>E<br>ADDRESS   | ec when reinstating   | the appoir                      | DATE<br>DATE<br>ERS AND DIRE                        | g its reg<br>tered a  | gistered offic<br>igent. I am<br>S IN 12  |
| INY-SI-2/P       24 GIY-SI-2/P         INE       DELETE         AMAE       3 1 TITLE         INELI ADDRESS       3.3 STREEL ADDRESS         INY-SI-2/P       34 GIY-SI-2/P         INE       DELETE         AME       3.0 STREEL ADDRESS         INY-SI-2/P       34 GIY-SI-2/P         INE       DELETE         AME       2 NAME         IREEL ADDRESS       3.0 STREEL ADDRESS         INY-SI-2/P       34 GIY-SI-2/P         INE       DELETE         AME       4.1 TITLE         INP-SI-2/P       4.0 GIY-SI-2/P         INP-SI-2/P       4.0 GIY-SI-2/P         INP-SI-2/P       4.0 GIY-SI-2/P         INP-SI-2/P       4.0 GIY-SI-2/P         INEEL ADDRESS       5.1 TITLE         INP-SI-2/P       5.1 TITLE         INP-SI-2/P       5.1 TITLE         INP-SI-2/P       5.1 STREEL ADDRESS         INY-SI-2/P       5.1 TITLE         INP-SI-2/P       5.4 GIY-SI-2/P         INP-SI-2/P       5.4 GIY-SI-2/P         INEET ADDRESS       5.3 STREEL ADDRESS         INY-SI-2/P       5.4 GIY-SI-2/P         INF       6.1 TITLE         SINEEL ADDRESS  | familiàr wi<br>SIGNATURE<br>ITLE<br>AME<br>IREET ADORESS<br>ITY - ST-ZIP<br>ILE   | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, ]<br>and litle II ar plicate<br>D DIFR C1 ORS | Delete  | is, the above<br>of by the co<br><b>13.</b><br>1 1 178L<br>1 2 NAM<br>1.3 STRE<br>1.4 GTY<br>2 1 TRL  | e-named corpo<br>rporation's boa<br>grant signature require<br>(E<br>(E<br>(E<br>(E)<br>(E)<br>(E)<br>(E)<br>(E)<br>(E)<br>(E)<br>(E   | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its red<br>lered a<br>CTOR  | gistered offic<br>gent. I am<br>S IN 12   |
| ITLE       DELETE       3 1 TILE       Change       Addition         AME       32 NAME       33. STREEL ADDRESS       33. STREEL ADDRESS         ITV-S1-ZIP       34 CITV-S1-ZIP       34 CITV-S1-ZIP       Change       Addition         AME       DELETE       4.1 TITLE       Change       Addition         ARE       32. STREEL ADDRESS       34 CITV-S1-ZIP       Change       Addition         ARE       0ELETE       4.1 TITLE       Change       Addition         INEEL ADDRESS       33. STREEL ADDRESS       4.2 NAME       Change       Addition         INEEL ADDRESS       111.LE       Change       Addition       Addition         INEEL ADDRESS       52. NAME       Change       Addition         INF-ST-ZIP       54 CITV-ST-ZIP       Change       Addition         MAE       52. NAME       53. STREEL ADDRESS       111.LE       Change       Addition         MAE       52. NAME       53. STREEL ADDRESS       53. STREEL ADDRESS       111.LE       Change       Addition         MAE       63. STREEL ADDRESS       53. STREEL ADDRESS       53. STREEL ADDRESS       111.LE       Change       Addition         ME       0ELETE       6. TITILE       6. TITILE       Cha  | familiàr wi<br>BIGNATURE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, ]<br>and litle II ar plicate<br>D DIFR C1 ORS | Delete  | IS, the above<br>of by the co<br><b>13.</b><br>1 1 THL<br>1 2 NAM<br>1.3 STRE<br><u>1.4 Crty</u><br>2 1 THL<br>2.2 NAM  | e-named corpo<br>reportation's boar<br>gent signature require<br>E<br>E<br>E<br>S1- ZIP<br>E<br>E  | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its red<br>lered a<br>CTOR  | gistered offic<br>gent. I am<br>S IN 12   |
| ITRELI ADDRESS       33. STREEL ADDRESS         IITY-SI-ZIP       34. CITY-SI-ZIP         ITLE       DELETTE         IAME       42. NAME         IREEL ADDRESS       43. STREEL ADDRESS         ITY-SI-ZIP       43. STREET ADDRESS         ITY-SI-ZIP       44. CITY-SI-ZIP         ITLE       DELETE         AME       51. TITLE         ITY-SI-ZIP       44. CITY-SI-ZIP         ITLE       DELETE         SI STREET ADDRESS       51. TITLE         ITTY-SI-ZIP       51. TITLE         ITY-SI-ZIP       53. STREET ADDRESS         ITY-SI-ZIP       53. STREET ADDRESS         ITY-SI-ZIP       53. STREET ADDRESS         ITY-SI-ZIP       54. CITY-SI-ZIP         ITLE       54. CITY-SI-ZIP         ITLE       54. CITY-SI-ZIP         ITLE       64. CITY-SI-ZIP         ITLE       54. CITY-SI-ZIP         ITLE       64. CITY-SI-ZIP         I  | familiar wi<br>BIGNATURE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, ]<br>and litle II ar plicate<br>D DIFR C1 ORS | Delete  | is, the above<br>of by the co<br><b>13</b> .<br>1 1 1011<br>1 2 NAM<br>1.3 STRE<br>1.4 City<br>2 1 TRL<br>2.2 NAM<br>2 3 STRE   | e-named corpo<br>imporation's boar<br>grint signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its red<br>lered a<br>CTOR  | gistered offic<br>gent. I am<br>S IN 12   |
| JITY-SI-ZIP       34 CITY-SI-ZIP         ITLE       DELETTE         IAME       1111LE         IAME       4.111LE         IAME       4.111LE         IAME       4.111LE         IAME       4.111LE         IAME       4.111LE         IAME       4.111LE         IAME       1.111LE         IAME       1.111LE         IAME       1.111LE         IAME       1.111LE         IAME       5.2 NAME         IAME       5.3 STREET ADDRESS         ITY-SI-ZIP       5.4 CITY-SI-ZIP         ITHE ADDRESS       5.3 STREET ADDRESS         ITY-SI-ZIP       6.4 CITY-SI-ZIP         IA L do hereby certify that the information supplied with this filling is voluntarily lumished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes.   further certify that the information public a  | familiar wi<br>BIGNATURE<br>2.<br>2.<br>11LE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>IREET ADDRESS<br>ITY - ST - ZIP<br>ILE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | Delle TE  | IS, the above<br>of by the co<br><b>13</b> .<br>1 1 101<br>1 2 NAM<br>1 3 STRE<br>2 1 101<br>2 2 NAM<br>2 3 STRE<br>2 4 CITY<br>3 1 101   | e-named corpo<br>rporation's boa<br>grint signature require<br>.E.<br>.E.<br>.E.<br>.ET ADDRESS<br>.ST - ZIP<br>E.<br>.ET ADDRESS<br>.ST - ZIP<br>E.   | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its reg<br>tered a<br>CTOR<br>ange  | S IN 12   |
| INLE       DELFTE       4.1 TITLE       Change       Addition         AME       4.2 NAME       4.3 STREET ADDRESS       4.3 STREET ADDRESS       4.4 CITY - ST - ZIP       4.4 CITY - ST - ZIP       4.4 CITY - ST - ZIP       Change       Addition         ITLE       DELFTE       5.1 TITLE       Change       Addition         AME       SIREET ADDRESS       5.2 NAME       Change       Addition         ITY - ST - ZIP       5.4 CITY - ST - ZIP       5.4 CITY - ST - ZIP       Change       Addition         ITY - ST - ZIP       5.4 CITY - ST - ZIP       5.4 CITY - ST - ZIP       Change       Addition         ITEET ADDRESS       DELETE       6.1 TITLE       Change       Addition         ITY - ST - ZIP       SI REET ADDRESS       6.3 STREET ADDRESS       Change       Addition         ITY - ST - ZIP       SI REET ADDRESS       6.3 STREET ADDRESS       SI SI STREET ADDRESS       SI S  | familiar wi<br>BIGNATURE<br>TILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TILE<br>AME   | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | Delle TE  | It Registered A<br>13.<br>1 1 177L<br>1 2 NAM<br>1 3 STRE<br>2 1 TRL<br>2 2 NAM<br>2 3 STRE<br>2 4 CITY<br>3 1 TIL<br>3 2 NAM   | e-named corpo<br>rporation's boa<br>print signature require<br>.E.<br>IE<br>ET ADDRESS<br>-S1-ZIP<br>E.<br>ET ADDRESS<br>-S1-ZIP<br>E.<br>E.   | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its reg<br>tered a<br>CTOR<br>ange  | S IN 12   |
| AME     42 NAME       IREET ADDRESS     43 STREET ADDRESS       ITV-ST-ZIP     44 CITY-ST-ZIP       AME     5 1 TITLE       AME     52 NAME       IREET ADDRESS     53 STREET ADDRESS       ITY-ST-ZIP     54 CITY-ST-ZIP       ITLE     DELETE       64 CITY-ST-ZIP     Change       Addition       REET ADDRESS     53 STREET ADDRESS       ITY-ST-ZIP     54 CITY-ST-ZIP       ITLE     DELETE       61 TITLE     Change       Addition       STREET ADDRESS       ITY-ST-ZIP       64 CITY-ST-ZIP       Change       Addition       STREET ADDRESS       ITY-ST-ZIP       64 CITY-ST-ZIP       Change       IREET ADDRESS       ITY-ST-ZIP       64 CITY-ST-ZIP       64 CITY-ST-ZIP       64 CITY-ST-ZIP       64 CITY-ST-ZIP       64 CITY-ST-ZIP       4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not gualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information infored end on this applied with this filing  | familiar wi<br>BIGNATURE<br>ITLE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>ILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>ILE<br>AME<br>IREET ADDRESS  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | Delle TE  | s, the above<br>of by the co<br><b>13.</b><br>1 1 177L<br>1 2 NAM<br>1 3 STRE<br>1 4 GTY<br>2 1 TRL<br>2 2 NAM<br>2 3 STRE<br>2 4 GTY<br>3 1 TIL<br>3 2 NAM<br>3.3 STRE   | e-named corpo<br>rporation's boa<br>gent signature require<br>.E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ec when reinstating   | the appoir                      | Dese of changing<br>ntment as regis                 | g its reg<br>tered a<br>CTOR<br>ange  | S IN 12   |
| ITY-SI-ZIP       44 CITY-SI-ZIP         ITUE       DELETE         S STREET ADDRESS       5 1 TITLE         ITY-SI-ZIP       Change         Addition         SSTREET ADDRESS         ITY-SI-ZIP         ITUE         DELETE         6.1 TITLE         ITY-SI-ZIP  | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY - ST - ZIP<br>TILE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13.</b><br>1 1 17/1<br>1 2 NAM<br>1 3 STRE<br>1 4 CTY<br>2 1 TTL<br>2 2 NAM<br>2 3 STRE<br>2 4 CTY<br>3 1 TTL<br>3 2 NAM<br>3.3 STRE<br>3.4 CTY  | e-named corpo<br>rporation's boa<br>print signature require<br>.E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha                         | g its reg<br>lered a<br>CTOR<br>ange  | S IN 12<br>Addition   |
| ILE       DELETE       5 1 TITLE       Change       Addition         AME       5 2 NAME       5 3 STREET ADDRESS       5 3 STREET ADDRESS       10 Change       Addition         ITY-ST-ZIP       5 4 CITY-ST-ZIP       5 4 CITY-ST-ZIP       10 Change       Addition         ITLE       DELETE       6 1 TITLE       10 Change       Addition         AME       DELETE       6 1 TITLE       10 Change       Addition         IREET ADDRESS       5 3 STREET ADDRESS       6 3 STREET ADDRESS       10 Change       Addition         ITY-ST-ZIP       6 4 CITY-ST-ZIP       6 4 CITY-ST-ZIP       10 Change       Addition         4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not gualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information increated on this account proved to represent the proved to reproved to represent the pr   | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>TY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>TY-ST-ZIP<br>TILE<br>MME               | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13.</b><br>1 1 Titl<br>1 2 NAM<br>1 3 STRE<br>1 4 GTY<br>2 1 Titl<br>2 2 NAM<br>2 3 STRE<br>2 4 GTY<br>3 1 Titl<br>3 2 NAM<br>3.3 STRE<br>3.4 City<br>4.1 Titl   | e-named corpo<br>rporation's boa<br>gent signature require<br>.E.<br>IE<br>EET ADDRESS<br>-ST-ZIP<br>E<br>EET ADDRESS<br>-ST-ZIP<br>E<br>EET ADDRESS<br>-ST-ZIP<br>E<br>EET ADDRESS<br>-ST-ZIP<br>E<br>E | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha                         | g its reg<br>lered a<br>CTOR<br>ange  | S IN 12<br>Addition   |
| AME S2 NAME S2 NAME S3 STREET ADDRESS S4 CITY-ST-ZIP S4 CITY-ST-ZIP Change Addition Addition AME (Change Addition B2 NAME (Change Addition B2 NAME (Change Addition B2 NAME (Change Addition B2 NAME (Change B3 STREET ADDRESS (Ch | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADORESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>TY-ST-ZIP<br>TILE<br>AME<br>REET ADDRESS<br>REET ADDRESS                            | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br>1 1 Tiff<br>1 2 NAM<br>1 3 STRE<br>1 4 GTY<br>2 1 Tiff<br>2 2 NAM<br>2 3 STRE<br>2 4 GTY<br>3 1 Tiff<br>3 2 NAM<br>3.3 STRE<br>3 4 City<br>4.1 Tiff<br>4.2 NAM<br>4.3 STRE   | e-named corpo<br>rporation's boa<br>print signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha                         | g its reg<br>lered a<br>CTOR<br>ange  | S IN 12<br>Addition   |
| IREET ADDRESS       5.3 STREET ADDRESS         ITY-ST-ZIP       5.4 CITY-ST-ZIP         TLE       DELETE         DELETE       6.1 TITLE         MRE       B2 NAME         ITY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 CITY-ST-ZIP         Addition       6.2 NAME         STY-ST-ZIP       6.4 CITY-ST-ZIP         4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1.19.07(3)(k), Florida Statutes, I further certify that the information inficiated on this applied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 1.19.07(3)(k), Florida Statutes, I further   | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>REET ADDRESS<br>TY-ST-ZIP<br>TILE<br>REET ADDRESS<br>TY-ST-ZIP  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13.</b><br>1 1 Tiff<br>1 2 NAM<br>1 3 STRE<br>1 4 GTY<br>2 1 Tiff<br>2 2 NAM<br>2 3 STRE<br>2 4 GTY<br>3 1 Tiff<br>3 2 NAM<br>3.3 STRE<br>3 4 City<br>4.1 Tiff<br>4.2 NAM<br>4.3 STRE<br>4 4 GTY   | e-named corpo<br>rporation's boa<br>print signature require<br>.E.<br>.E.<br>.E.<br>.E.<br>.E.<br>.E.<br>.E.<br>.E   | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha<br>Cha                  | g its reg<br>lered a<br>CCTOR<br>inge   | Sitered offic<br>igent. I and<br>SIN 12<br>Addition<br>Addition                               |
| TLE       DELETE       0.11711.6       Change       Addition         MME       6.11711.6       DELETE       6.11711.6       DELETE       Change       Addition         MME       6.2 NAME       5.3 STREET ADDRESS       6.3 STREET ADDRESS       6.4 CITY-ST-ZIP       Change       Addition         4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this applied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further  | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADORESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>REET ADDRESS<br>TY-ST-ZIP<br>TILE<br>MME<br>REET ADDRESS<br>IY-ST-ZIP<br>TILE                        | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br>1 1 Tiff<br>1 2 NAM<br>1 3 STRE<br>1 4 GTY<br>2 1 Tiff<br>2 2 NAM<br>2 3 STRE<br>2 4 CTY<br>3 1 Tiff<br>3 2 NAM<br>3.3 STRE<br>4 CTY<br>5 1 Tiff   | e-named corpo<br>rporation's boa<br>print signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E   | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha<br>Cha                  | g its reg<br>lered a<br>CCTOR<br>ange<br>unge                                 | Sitered offic<br>igent. I and<br>SIN 12<br>Addition<br>Addition                               |
| ME Change Addition<br>REET ADDRESS   | familiar wi<br>BIGNATURE _<br>TILE<br>AME<br>IREET ADORESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREET ADDRESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>REET ADDRESS<br>TY-ST-ZIP<br>TILE<br>MME<br>REET ADDRESS<br>TY-ST-ZIP<br>TILE<br>MME<br>REET ADDRESS | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br><b>13</b> .<br><b>117</b> .<br><b>13</b> .<br><b>117</b> .<br><b>12</b> .<br><b>13</b> .<br><b>117</b> .<br><b>12</b> .<br><b>13</b> .<br><b>117</b> .<br><b>12</b> .<br><b>13</b> .<br><b>117</b> .<br><b>12</b> .<br><b>13</b> .<br><b>13</b> .<br><b>13</b> .<br><b>117</b> .<br><b>12</b> .<br><b>14</b> .<br><b>17</b> .<br><b>12</b> .<br><b>14</b> .<br><b>17</b> .<br><b>17</b> .<br><b>12</b> .<br><b>14</b> .<br><b>17</b> .<br><b>1</b> .<br><b>1</b> . <b>1</b> .<br><b>1</b> .<br><b>1</b> .<br><b>1</b> .<br><b>1</b> . | e-named corpo<br>rporation's boa<br>gent signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha<br>Cha                  | g its reg<br>lered a<br>CCTOR<br>ange<br>unge                                 | Sitered offic<br>igent. I and<br>SIN 12<br>Addition<br>Addition                               |
| If REET ADDRESS     63 STREET ADDRESS       TY-ST-ZIP     64 CITY-ST-ZIP       4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this applied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further   | familiar wi<br>BIGNATURE _<br>2.<br>TILE<br>AME<br>IREELADORESS<br>ITY-ST-ZIP<br>TILE<br>AME<br>IREELADDRESS<br>ITY-ST-ZIP<br>TILE<br>MME<br>REELADDRESS<br>ITY-ST-ZIP<br>TILE<br>MME<br>REELADDRESS<br>ITY-ST-ZIP                            | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br>1 1 Titl<br>1 2 NAM<br>1 3 STRE<br>1.4 GTY<br>2 1 Titl<br>2 2 NAM<br>2 3 STRE<br>2 4 GTY<br>3 1 Titl<br>3 2 NAM<br>3.3 STRE<br>4 CTY<br>5 1 TITL<br>5 2 NAM<br>5 3 STRE<br>5 4 CTY   | e named corpo<br>rporation's boa<br>gent signature requir.<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIRE<br>Cha<br>Cha                  | g its reg<br>lered a<br>CCTOR<br>ange<br>unge                                 | Sitered offic<br>igent. I and<br>SIN 12<br>Addition<br>Addition                               |
| ITY-ST-ZIP         64 City-ST-ZIP           4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual reveal of the exemption stated in Section 119.07(3)(k). Florida Statutes. I further  | familiar wi<br>BIGNATURE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br>1 1 Title<br>1 2 NAM<br>1 3 STRE<br>1 4 City<br>2 1 Title<br>2 2 NAM<br>3 3 STRE<br>2 4 City<br>4 1 Title<br>4 2 NAM<br>4 3 STRE<br>4 4 City<br>5 1 Title<br>5 2 NAM<br>5 3 STRE<br>5 4 City<br>6 1 Title  | e-named corpo<br>rporation's boa<br>gent signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIFIE<br>Cha<br>Cha<br>Cha          | g its rec<br>lered a<br>rCTOR<br>ange<br>ange<br>ange<br>ange                 | SIN 12<br>Addition  |
| 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report in two and and report and that much methods.  | familiar wi<br>SIGNATURE  | Ith, and accept<br>Signature typed or p<br>PD<br>MARTINE<br>3661 S M          | the obligations of, Section<br>wither name of registered agent a<br>OFFICERS AND<br>Z, ELENA R.                   | on 607.0505, 1   | DELETE  | s, the above<br>of by the co<br><b>13</b> .<br>1 1 Title<br>1 2 NAM<br>1 3 STRE<br>1 4 City<br>2 1 Title<br>2 2 NAM<br>2 3 STRE<br>2 4 City<br>3 1 Title<br>3 2 NAM<br>3 3 STRE<br>4 4 City<br>5 1 Title<br>5 2 NAM<br>5 3 STRE<br>5 4 City<br>6 1 Title<br>5 2 NAM   | e-named corpo<br>rporation's boa<br>gent signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ec when reinstating   | the appoir                      | DATE<br>ERS AND DIFIE<br>Cha<br>Cha<br>Cha          | g its rec<br>lered a<br>rCTOR<br>ange<br>ange<br>ange<br>ange                 | SIN 12<br>Addition  |
|  | familiar wi<br>SIGNATURE  | Ith, and accept is<br>Signature typed or p<br>MARTINE<br>3661 S M<br>MIAMI FL | the obligations of, Sectic<br>Vitted name of registered agrit a<br>OFFICE RS AND<br>Z, ELENA R.<br>IIAMI AVE #801 | on 607.0505, 1   | DELETE DELETE DELETE DELETE DELETE DELETE DELETE                                      | s, the above<br>of by the co<br><b>13.</b><br>1 1 17/L<br>1 2 NAM<br>1 3 STRE<br>1 4 City<br>2 1 Titl<br>2 2 NAM<br>2 3 STRE<br>2 4 City<br>3 1 Titl<br>3 2 NAM<br>3 3 STRE<br>3 4 City<br>4 1 Titl<br>5 2 NAM<br>5 3 STRE<br>5 4 City<br>6 1 Titl<br>6 4 City  | e named corpo<br>rporation's boa<br>gent signature require<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E<br>E  | ADDITIONS/CHANGE  |                                 | DATE<br>ERS AND DIRE<br>Cha<br>Cha<br>Cha           | g its rec<br>lered a<br>CCTOR<br>ange<br>ange<br>ange<br>ange<br>ange<br>ange | Sitered officigent. Lam SIN 12 Addition Addition Addition Addition Addition Addition Addition |