

**FILED**  
**Feb 27, 2003 8:00 am**  
**Secretary of State**

DOCUMENT # 603105



Mailing Address  
715 DUPONT PLAZA CENTER  
300 BISCAYNE BOULEVARD WAY  
MIAMI FL 33131-2209  
DA

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

Not Applicable
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7. Name and Address of New Registered Agent:

Zip Code

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
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TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Do1

Daytime Phone # \_\_\_\_\_

CR2E034 (10/02)