

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 666469 1. Corporation Name

FILED
Apr 14, 1999 8:00 am
Secretary of State
04 14 1000 00150 040 ***150 00

04-14-1999 90159 049 04-14-1999 90159 050 \*\*\*\*\*8.75

BRICKELL EXECUTIVE TRAVEL,	INC.						
Principal Place of Business	Mailing Address				18 91110 B\$11\$ B1819 B1110 14	IN MANUE MANUEL MANUE	Billi bilin militi jāli
600 BRICKELL AVE.	14124 SW 77 ST						
SUITE 104	MIAMI FL 33183						
MIAMI FL 33131	US				DO NOT WRITE II	N THIS SPACE	<u> </u>
US				3. Date Incorpor. 04/10/1980			
2. Principal Place of Business	2a, Mailing Address			4. FEI Number			Applied For
21	26			59-198906	9		Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		• -	5. Certificate of S	Status Desired		75 Additional
22	27			5. Certificate of C	otatus Desired Desired	' Fe	ee Required
City & State	City & State			6. Election Camp	paign Financing	\$5	.00 May Be
23	28			Trust Fund Co	ontribution	Ac	Ided to Fees
Zip Country	Zip	Country	y	g. This corporati	on owes the current y		
24 25	29	30		Personal Prop	<del></del>	Yes	s □No
9, Name and Address of Cu	rrent Registered Agent		·	10. Name and A	ddress of New Regis	stered Agent	
EDACCADELLI MADTA C		81	Name				
Frascarelli, Marta C. 600 Brickell Ave.		82	Street .	Address (P.O. Box Numb	er is Not Acceptable)		,
SUITE 104 MIAMI FL 33131		83			, , <u></u>		
MICHIEL COLOT		84	City			FL  85	Zip Code
11. Pursuant to the provisions of Sections 607	0000 1 007 4500 Flade Ctable	e the abou		cornoration submits this s	statement for the pure	ose of changi	ng its registered
office or registered agent, or both, in the S agent. I am familiar with, and accept the of	state of Florida. Such change was au bligations of, Section 607.0505, Flori	ithorized by ida Statutes	the corpose.	oration's board of director	s. I nereby accept the	з арроинтені	as registered
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  Signature, typed or printed name of registere	state of Florida. Such change was au bligations of, Section 607.0505, Flori agent and title if applicable. (NOTE:	ithorized by ida Statutes	the corpose.	oration's board of director	s. I nereby accept the	DATE	as registered
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE Signature, typed or printed name of registere  12. OFFICERS	state of Florida. Such change was au bligations of, Section 607.0505, Flori digetions of the section 607.0505 (NOTE: S AND DIRECTORS	Registered Age	the corpose.	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol  SIGNATURE  Signature, typed or printed name of registere  12. OFFICERS	state of Florida. Such change was au bligations of, Section 607.0505, Flori agent and title if applicable. (NOTE:	ithorized by ida Statutes Registered Age	the corpose.	oration's board of director	s. I nereby accept the	DATE	ECTORS IN 12
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  Signature, typed or printed name of registere  12. OFFICERS  TITLE T  NAME DEFELICE, HORACIO	state of Florida. Such change was au bligations of, Section 607.0505, Flori digetions of the section 607.0505 (NOTE: S AND DIRECTORS	Registered Age  13. 1.1 TITLE 1.2 NAME	/ the corpo	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  Signature, typed or printed name of registere  12. OFFICERS  TITLE  NAME  STREET ADDRESS  600 BRICKELL AVE.	state of Florida. Such change was au bligations of, Section 607.0505, Flori digetions of the section 607.0505 (NOTE: S AND DIRECTORS	Registered Age  13. 1.1 TITLE 1.2 NAME	/ the corpo	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  Signature, typed or printed name of registere  12. OFFICERS  TITLE  NAME  DEFELICE, HORACIO  600 BRICKELL AVE.  MIAMI FL 33131	titate of Florida. Such change was aubligations of, Section 607.0505, Florion 607.05	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S	ont signature r	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12 ange  Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  MIAMI FL 33131  TITLE  S  OFFICERS  AMAGE  DEFELICE, HORACIO  600 BRICKELL AVE.  MIAMI FL 33131	state of Florida. Such change was au bligations of, Section 607.0505, Flori digetions of the section 607.0505 (NOTE: S AND DIRECTORS	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE	y the corpo	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12 ange  Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  NAME  STRASCARELLI, LUIS E	titate of Florida. Such change was aubligations of, Section 607.0505, Florion 607.05	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S	y the corpo	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12 ange  Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  NAME FRASCARELLI, LUIS E STREET ADDRESS	titate of Florida. Such change was aubligations of, Section 607.0505, Florion 607.05	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	y the corpo	oration's board of director	s. I nereby accept the	DATE  ERS AND DIRI	ECTORS IN 12 ange  Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T  NAME DEFELICE, HORACIO  STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE S  STREET ADDRESS GOO BRICKELL AVE.  STREET ADDRESS GOO BRICKELL AVE.  MIAMI FL 33131  TITLE S  STREET ADDRESS GOO BRICKELL AVE.  MIAMI FL 33131	tate of Florida. Such change was aubligations of, Section 607.0505, Floridagent and title if applicable. (NOTE: S AND DIRECTORS  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ont signature of the corporation	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	PATE  ERS AND DIRI  Ch	ECTORS IN 12 ange Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P P	titate of Florida. Such change was aubligations of, Section 607.0505, Florion 607.05	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	ont signature of the corporation	oration's board of director	HANGES TO OFFICE	PATE  ERS AND DIRI  Ch	ECTORS IN 12 ange Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  11. T  NAME DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S  FRASCARELLI, LUIS E 600 BRICKELL AVE. CITY-ST-ZIP MIAMI FL 33131  TITLE S  FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P  NAME FRASCARELLI, MARTA C.	tate of Florida. Such change was aubligations of, Section 607.0505, Floridagent and title if applicable. (NOTE: S AND DIRECTORS  DELETE	Registered Age  13.  1.1 TITLE  12 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME	ont signature r  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	PATE  ERS AND DIRI  Ch	ECTORS IN 12 ange Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  12. OFFICERS  13. OFFICERS  14. OFFICERS  15. OFFICERS  15. OFFICERS  16. OBRICKELL AVE.  MIAMI FL 33131  17. SFRASCARELLI, LUIS E  600 BRICKELL AVE.  MIAMI FL 33131  17. E  STREET ADDRESS  CITY-ST-ZIP  MIAMI FL 33131  17. E  P  NAME  STREET ADDRESS	tate of Florida. Such change was aubligations of, Section 607.0505, Floridagent and title if applicable. (NOTE: S AND DIRECTORS  DELETE	Registered Age  13.  1.1 TITLE  12 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME	ont signature r  ET ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	PATE  ERS AND DIRI  Ch	ECTORS IN 12 ange Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE.  MIAMI FL 33131  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE FRASCARELLI, LUIS E 600 BRICKELL AVE.  MIAMI FL 33131  TITLE PRASCARELLI, MARTA C.	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE: S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE  12 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-	ont signature r  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition
office or registered agent, or both, in the Sagent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  12. OFFICERS  12. OFFICERS  13. OFFICERS  14. DEFELICE, HORACIO  600 BRICKELL AVE.  MIAMI FL 33131  15. STREET ADDRESS  CITY-ST-ZIP  MIAMI FL 33131  TITLE  STREET ADDRESS  CITY-ST-ZIP  MIAMI FL 33131  TITLE  PRASCARELLI, LUIS E  600 BRICKELL AVE.  MIAMI FL 33131  FRASCARELLI, MARTA C.  600 BRICKELL AVE.  MIAMI FL 33131	tate of Florida. Such change was aubligations of, Section 607.0505, Floridagent and title if applicable. (NOTE: S AND DIRECTORS  DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  3.4 CITY-  4.1 TITLE	ont signature r  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	PATE  ERS AND DIRI  Ch	ECTORS IN 12 ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  12. OFFICERS  12. OFFICERS  13. OFFICERS  14. DEFELICE, HORACIO  600 BRICKELL AVE.  MIAMI FL 33131  15. SFRASCARELLI, LUIS E  600 BRICKELL AVE.  MIAMI FL 33131  15. SFRASCARELLI, LUIS E  600 BRICKELL AVE.  MIAMI FL 33131  15. SFRASCARELLI, MARTA C.  600 BRICKELL AVE.  MIAMI FL 33131	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE: S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 32 NAME 3.3 STREE 34. CITY- 4.3 TITLE 4.2 NAME	T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  12. OFFICERS  13. OFFICERS  14. DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  15. STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  15. FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  15. FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  15. MIAMI FL 33131  15. MIAMI FL 33131  15. MIAMI FL 33131  15. MIAMI FL 33131	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE: S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 32 NAME 3.3 STREE 34. CITY- 4.3 TITLE 4.2 NAME	ont signature r  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S SIGNAME FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE NAME  STREET ADDRESS CITY-ST-ZIP	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 14 CITY-S 2.1 TITLE 22 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 32 NAME 3.3 STREE 34. CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  12. OFFICERS  13. OFFICERS  14. OFFICERS  15. OFFICERS  15. OFFICERS  16. OFFICERS  17. OFFICERS  18. OFFICERS  19. OFFICERS	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE: S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  4.4 CITY-  4.1 TITLE  4.2 NAME  4.3 STREE  4.4 CITY-S  5.1 TITLE	T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S SIGNAME FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE NAME  STREET ADDRESS CITY-ST-ZIP	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  4.4 CITY-  4.7 TITLE  4.2 NAME  4.3 STREE  4.4 CITY-S  5.1 TITLE  5.2 NAME	T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  4.4 CITY-  4.5 TITLE  4.5 NAME  5.5 NAME  5.3 STREE  5.1 TITLE  5.2 NAME  5.3 STREE  5.3 STREE	T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.3 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	T ADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE P NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE	Registered Age  13.  1.1 TITLE  1.2 NAME  1.3 STREE  1.4 CITY-S  2.1 TITLE  2.2 NAME  2.3 STREE  2.4 CITY-  3.1 TITLE  3.2 NAME  3.3 STREE  4.4 CITY-  5.1 TITLE  5.2 NAME  5.3 STREE  6.1 TITLE  6.1 TITLE	TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition ange Addition
office or registered agent, or both, in the S agent. I am familiar with, and accept the ol SIGNATURE  12. OFFICERS  TITLE T DEFELICE, HORACIO 600 BRICKELL AVE. MIAMI FL 33131  TITLE S FRASCARELLI, LUIS E 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE P FRASCARELLI, MARTA C. 600 BRICKELL AVE. MIAMI FL 33131  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP  TITLE NAME  STREET ADDRESS CITY-ST-ZIP	itate of Florida. Such change was aubligations of, Section 607.0505, Florida agent and title if applicable. (NOTE:  S AND DIRECTORS  DELETE  DELETE  DELETE	Registered Age  13.  1.1 TITLE 12 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.3 TITLE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME 6.2 NAME	TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP  TADDRESS ST-ZIP	oration's board of director required when reinstating)  ADDITIONS/CI	HANGES TO OFFICE	Ch	ECTORS IN 12 ange Addition ange Addition ange Addition ange Addition

14. 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 annual report or adoption and interest 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 of 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 chapted, of the address, with all other like empowered.

SIGNATURE;