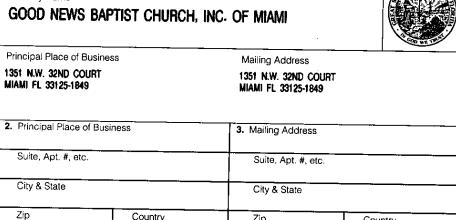
## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 725506

## 1. Entity Name



## **FILED** Feb 21, 2003 8:00 am § Secretary of State

02-21-2003 90845 027 \*\*\*\*61.25

Principal P	lace of Business	Ma	iling Address	<del></del>		1				
1351 N.W. 32ND COURT MIAMI FL 33125-1849		1351	1351 N.W. 32ND COURT MIAMI FL 33125-1849							
2. Principa	al Place of Business	T3. M	Mailing Address	<u></u>	<u></u>					
			naming Address				IBEN BINDI BINI BENJA I	HIII BİBLI BIĞIN BİBL		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. FEI Number <b>51-0188877</b> Applied For				
Zip	Country	,	Zip	Country		5. Certificate of Si	<del>"</del> -	□ \$8.		lot Applicabl Iditional
	6. Name and Addres	ss of Current Registe	ered Agent	<del></del> _				— Fee I	Requir	ed
				Name	e	7. Name and Add	iress of New He	gistered Agent		<u> </u>
GUZMA	N, OBEL	garda <del>garana kan</del> angganang sa		STE STEE T Strong	t.Addraga (F	1050 - NT. II.				
	W 32ND COURT			Silee		Of Box Number is 1	Not Acceptable)			•
MIAMI I	FL 33125-1849					·· <u>-</u>				
<u>.</u>	·			City					ip Cod	
<ol><li>The above</li></ol>	ve named entity submits this ations of registered agent.	s statement for the pur	rpose of changing its	s registered office	or registere	ed agent, or both, in	the State of Florid	da. Lam familia	r with.	and accept
the oblig	ations of registered agent.									шта ассорс
SIGNATURE										
SIGIVALURE										
	Signature, typed or printed name o	of registered agent and title if a	pplicable. (NOT	E: Registered Agent sig	nature required v	when reinstation				
		of registered agent and title if ag	pplicable. (NOT	E: Registered Agent sig	nature required w	when reinstating)		DATE		
	Signature, typed or printed name o		<u> </u>		T 118					
			<u> </u>	mpaign Financing	· · ·	\$5.00 May Be	Make Florida	Check Pay	able	to
	Signature, typed or printed name of	\$61.25	9. Election Car Trust Fund C	mpaign Financing	· · ·		Make Florida		able	to State
10.	FILE NOW: FEE IS S		9. Election Car Trust Fund C	mpaign Financing	)	\$5.00 May Be Added to Fees	Florida	Check Pay Departmen	t of S	State
<b>10.</b> OTLE	FILE NOW: FEE IS \$  OFFIC	61.25 ERS AND DIRECTORS	9. Election Car Trust Fund C	mpaign Financing Contribution.	AL D	\$5.00 May Be Added to Fees DDITIONS/CHANGE	Florida	Check Pay Departmen	t of S	State
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10. Title Name Street address	FILE NOW: FEE IS \$  OFFIC  D CARRAZANA, ALFREC 8758 SW 12 ST # 10	661.25 ERS AND DIRECTORS	9. Election Car Trust Fund C	mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS	D SOSA 14250	\$5.00 May Be Added to Fees DDITIONS/CHANGE NELSON S W 62TH S	Florida S TO OFFICERS	Check Pay Departmen	t of S	State 10
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12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

DIRECTOR

01/31/2003

305 635 8058