DOCU	MENT # F010	00002069					(A)	
NICOCAF					- FIL	ED	8	
Principal Plac	ce of Business	Mailing Address			02 MAR-25	AM 10: 05		
701 BRICKELL AVE. SUITE 3000 MIAMI FL 33131		701 BRICKELL AVE. Suite 3000 Miami FL 33131	701 BRICKELL AVE. SUITE 3000		SECKETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business 2600 SW 3rd Avenue 3. Mailing Address 2600 SW 3rd Avenue			07110					
Suite, Apt.	. #, etc.	Suite, Apt. #, etc. Suite 705	ciide		DO NOT WRITE IN THIS SPACE			
City & Stat Miami , 1	te	City & State			FEI Number 65-1007589	———	pplied For ot Applicable	
^{Zip} 33129	Country USA	Zip 33129	Country USA	5.	Certificate of Status Desired	S8.75 Ad Fee Require	Iditional	
	6. Name and Address of Curre	nt Registered Agent		7.	Name and Address of New Regi	stered Agent	1	
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE. SUITE 3000 MIAMI FL 33131				et Address (P.O. 1 601 South uite 1600				
1417 4441 1 6	00101		M	iami		FL Zip Cod	l [®] 29	
SIGNATURE Signature interest printing name of registered agent and title if applicable. (NOTE: Registered Agent signature required 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See Critéria on back) FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State				50.00 e \$550.00 nent of State	10. Election Campaign Financ Trust Fund Contribution.	☐ Added	00 May Be	
11.		ID DIRECTORS	12.		DDITIONS/CHANGES TO OFFICE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHAMAS, BORIS 701 BRICKELL AVE. MIAMI FL 33131	□ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP		7 3rd Avenue, #705 FL 33129	XX Change	noitippy	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LUCIA BAENA, GLORIA 701 BRICKELL AVE. MIAMI FL 33131	□ Delete	TITLE NAME STREET ADDR CITY-ST-ZIP	2600 SW	7 3rd Avenue, Suite FL 33129	∏ kChange e 705	Addition S	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TORRES, HERNAN 701 BRICKELL AVE. MIAMI FL 33131	☐ Delete	TITLE NAME STREET ADOR CITY-ST-ZIP		7 3rd Avenue, Suite FL 33129	XXChange e 705	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS	7000052: -04/16/02 *****150.	□ Change 32927- 2010620 .00 ****15		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ESS	78	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRI CITY-ST-ZIP	ess		☐ Change	☐ Addition	
of the cor	certify that the information supplied w on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address	is true and accurate and that me powered to execute this report a	iv signature sh	all have the same.	legal affect as if made under oath	that I am an officer	or director	

SIGNATURE: V <u>2002 (305) 285-704</u>b SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR