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I. I hereby certify that the information supplied with this filing does not cualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 receivery 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 changed, or on an attachment with an address.	LE ME REET ADDRESS IV-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP	Signature, typed or printed na TD SUAREZ, MANUI 8236 SW 10TH MIAMI, FL 0000C PD SUAREZ, EVARIS 8244 SW 10TH MIAMI, FL 0	me of registered agent and little if OFFICERS AND DIRECT EL O TERRA) STO A. TER		TE: Registered Agent eff 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDI 1.4 CITY-ST-ZII 2.1 TITLE 2.1 STREET ADDI 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME 3.3 STREET ADDI 2.4 CITY-ST-ZII 3.1 TITLE 3.2 NAME 3.3 STREET ADDI 3.4. CITY-ST-ZII 4.1 TITLE 5.2 NAME 5.3 STREET ADDI 4.4 CITY-ST-ZII 5.1 TITLE 5.2 NAME 5.3 STREET ADDI 5.4 CITY-ST-ZII 6.1 TITLE 6.2 NAME 6.3 STREET ADDI 6.4 CITY-ST-ZII 6.1 TITLE 6.2 NAME 6.3 STREET ADDI 6.4 CITY-ST-ZII	RESS P	when refinistating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTOF Change Change Change Change Change Change Change Change	Addition Addition Addition Addition Addition Addition Addition Addition
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