FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00						
	PROFIT FLORIDA DEPARTMENT OF STATE			APPROVEDAND		
	ORPORATION Sandra B. Morths NUAL REPORT SAcretary of Sta			FILED		
2 * **	1996	77	y of State CORPORATIONS	1997 AUG 21 PH 12: 20	,	
	(000	01397	SECOND 21 PH 12: 20	SECONDA 1 LU 17: 50		
DOCUMENT #F960000169 / 1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA	TALLAHASSES STATE	
AMBASSA HOLDINGS, INC.				THE TOURIDA	·	
Principal Place of Business Mailing Address						
5415 COLLINS AVENUE						
SUITE 305				·		
MIAMI BEACH, FLORIDA 33140				3. Date Incorporated or Qualified 3a. Date of Last 6 March 23, 1995 N/A	Report	
2. Principal Place of Business 2a. Mailing Address			and land	7) 4. FEI Number	Applied For	
Suite. Apt #. etc. Suite. Apt #. etc. Suite. Apt #. etc.			DRTH BAY 1	40.74	Not Applicable Additional	
27				I D. Lennicate of Status Desired (A.)	Required	
City & State	,	28 Nu AMI	EACH		O May Be d to Fees	
Zip	Country	Zip 5	Country	8. This corporation has liability for intangule tax under		
24	9. Name and Address of Current		30 33140	Florida Statutes Yes You No. 10. Name and Address of New Registered Agent		
Corporation Service Company 81 Name CHRISTIAN de BERDOUARE						
1201 Hays Street 82 Street Address (P.				Address (P.O. Box Number is Not Acceptable).	s (P.O. Box Number is Not Acceptable)	
randilassee, Fiorita 52501			SO NORTH BAY ROAS			
84 City				MIAMI BEACH las z	D Code	
				corporation submits this statement for the purpose of changing	33140	
11. Pursuant to the previous of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent for both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am lample: and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Syndrie typed or profiled name of registered agent and title if applicable (NOTE Registered Agent agrand when reinstating) DATE STORY ST						
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	ORS IN 12	
TITLE NAME	P Christian DeBerdor	☐ DELETE	1 1 TITLE 12 NAME	Change	P	
STREET ADDRESS	5415 Collins Avenue, Suite 305		1 3 STREET ADDRESS	Change not Address	R B	
CITY-ST-ZIP	Miami Beach, FL	33140	1 4 CITY - ST - ZIP	all A		
TITLE NAME	Christian Do Bondo	☐ DELETE	2 1 TITLE 22 NAME	5750 NORTH BAY ROA		
STREET ADDRESS	Christian De Berdouare 5415 Collins Avenue		2 3 STREET ADDRESS	5 750 NORTH BAY KOAD		
CITY-ST-ZIP TITLE	Miami Beach, Florida 33140		2 4 CITY-ST-2IP 3 1 TITLE	104+MU THEHOLI, M. 33	Addition	
NAME	Christian De Berdouare		3.2 NAME		, Ladillon	
STREET ADDRESS	5415 Colling Avenue Suite 200		3.3 STREET ADDRESS	ar	1.0	
CITY_ST-ZIP	Miami Beach, Florida 33140		3.4 CITY-ST-ZIP	O Vision	Addition	
NAME	Christian De Berdo	luare	4.2 NAME	REINSTATEMENT 8	ייע	
STREET ADDRESS CITY-ST-ZIP	5415 Collins Avenue, Suite 305		4.3 STREET ADDRESS	The state of the s		
TITLE	Mlami Beach, Florida 33140 DELETE		4.4 CITY+ST+ZIP 5.1 TITLE	Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 CITY+ST+ZIP	200002277312	3020	
TITLE		DELETE	6 1 TITLE	*************************************		
NAME STREET ADDRESS		•	6 2 NAME			
CITY-ST-ZIP	1111	1 //	6 3 STREET ADDRESS 6 4 City-St-Zip			
14 Ido bereby certify that the effective helical with the files is released to the control of th						
further certify that the information indigited politics and observed and observed and observed the semption stated in Section 119.0/3/k/). Florida Statutes I further certify that the information indigited politics and indigited politics. The indigited politics are required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of Bloc						
SIGNATURE: 8/12/97 (305) 867 - 4433						
SIGNATURE: SIGNATURE AND TYPED ON PRINTED PRIN						

Section 10 market 10 marke