FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Apr 14 1998 8:00am

	1998		Secretary of State DIVISION OF CORPORATIONS			s	Secretary of State			
DOCUMENT # H15936 (8) 1. Corporation Name RUDY CECCHI & ASSOCIATES, INC.										
Principal Plac	e of Business	M:	ailing Address				1 (68191) \$101 (1081 8/110 10168 4111 0111 \$181 0101		1811 B1814 1881	
255 ALHAMBRA CIRCLE SUITE 710 CORAL GABLES FL 33134 US 255 ALHAMBRA CIRCLE SUITE 710 CORAL GABLES FL 33134 US 255 ALHAMBRA CIRCLE SUITE 710 CORAL GABLES FL 33134 US							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
A Delevate at 0	Mailing Address				08/10/1984 4. FEI Number			4		
2. Principal Place of Business			26. Maining Address							-
Suite, Apt.	#, etc.	1201	Suite, Apt. #, etc.						Not Applicable Additional	4
22		27					5. Certificate of Status Desired	Fee	Required	
City & State			City & State				8. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe			
Zip	Count	· —	Zip	Cou	intry		8. This corporation owes or has paid the cu			
24]	25 9 Name and Addr	29 ess of Current Regis	lered Agent	30			Personal Property Tax due June 30. 10. Name and Address of New Registered		L] No	\dashv
CF	CCHI, RUDOLPH				81 N	lame	19.			1
	ALHAMBRA CIRCL	E, SUITE 710		}	82 S	Street Addr	ess (P.O. Box Number is Not Acceptable)			4
SUITE 710							ous (1.0. box Marrison is 1407 / odoprasic)		···	╛
CO	RAL GABLES FL 33	134		ļ	B3					-
					84 C	City	FL	85 Zip	p Code	1
11. Pursuant office or r	to the provisions of Sec egistered agent, or bot	ctions 607.0502 and 6 h, in the State of Florid	07.1508, Florida Statut la Such change was e	es, the at	bove-na	amed corp e corporat	oration submits this statement for the purpose cion's board of directors. I hereby accept the app	f changing pointment a	its registered is registered	
agent I a	m familiar with, and ac						ed when reinstating) DATE			
12.		OFFICERS AND DIREC	··	13.	n whattra	Miletone redox	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTO	ORS IN 12	16
TITLE	PST		☐ DELETE	1,1 1/1	TLE	7		Change		15
NAME CECCHI, RUDOLPH					NAME					5
STREET ADDRESS		CIRCLE, SUITE 710	E 710		TREET ADDRESS					Įμ
CITY-ST-ZIP TITLE	CORAL GABLES	<u>rt</u>	DELETE	1.4 CIT 2.1 TIT	TY-ST-ZI	IP		Change	Addition	۱à
NAME			La Decent	2.1 III				L_J Ollarige	LJ AGUIDII	
STREET ADDRESS				1	reet ade	DRESS				
CITY-ST-ZIP				2 4 CI	ITY-ST-Z	1P]				1
TITLE			DELETE	3.1 117	TLE			Change	Addition	1
NAME				3.2 NA		İ				
STREET ADDRESS					REET ADD	1				1
CITY-ST-ZIP TITLE			DELETE	4.1 TH	ITY-ST-Z ILE	-		Change	Addition	1
NAME				4. 2 N	AME	1				1
STREET ADDRESS				4.3 ST	REET ADD	DRESS				
CITY-ST-ZIP					TY-ST-2	IP				4
TALE			DELETE	5.1 TIT		ļ		Change	Addition	
NAME STREET ADDRESS				5.2 NA	VME Reet add	nress !				
CITY-ST-ZIP				1	KEET AUG TY-ST-ZI					
TITLE			DELETE	6.1 TIT				Change	Addition	1
NAME				6.2 NA	ME	Ţ				
STREET ADDRESS				6.3 ST	REET ADO	PRESS				
CMY-ST-ZIP	actify that the inforcer!	on a unalization of	line dans = 1 suglit . X-	6.4 CIT	IY-ST-Z	P I	Section 119 07/2VIX Elevide Statute 15 ml	artifu that "	a information	4
indicated officer or	on this annual report of director of the corporat	r supplemental annual ion of the occeive or t	report is true and according to	urate and execute the	that n	ny signatui ort as requ	Section 119,07(3)(i), Florida Statutes. I further or re shall have the same legal effect as if made ur uired by Chapter 607, Florida Statutes; and that i	nder oath; t my name a	hat I am an ppears in	

SIGNATURE:

RUDOLPH CECCHI, PRESIDENT 4/7/98 (305) 445-6181